

CHEMIST & DRUGGIST

the newswweekly for pharmacy

April 20, 1991



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ABPI slams 13 year patent life proposal

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Ref. 1: Martin Hamblin Research
The purchasing of OTC
Hydrocortisone January 1990

CHEMIST & DRUGGIST

INCORPORATING
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Editor: John Skelton, MRPharmS
Deputy Editor: Patrick Grice, MRPharmS
Assistant Editor: Robert Darracott, MRPharmS

Contributing Editor: Adrienne de Mont, MRPharmS

Business Editor: Zachary Goldring, MSc

Technical Editor: Charlotte Coker, MRPharmS

Reporters: Jane Feely, PhD, MRPharmS
Jacqui Brommell, MRPharmS
Sarah Purcell, BA

Art Editor: Tony Lamb

Price List Controller: Colin Simpson

Advertisement Manager: Frances Shortland

Assistant Advertisement Manager: Doug Mytton

Advertisement Executives: Julian de Bruxelles

Pauline Borda

Production: Shirley Wilson

Publisher: Ronald Salmon, FRPharmS

Director: Felim O'Brien

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COMMENT

As usual the Government seems to be wanting to have its cake and eat it — or rather bottle its tablets and swallow them. This week it has at last made known its stance on EC proposal to extend the patent life of medicines to 16 years by the issue of a supplementary protection certificate. For the Government Lord Hesketh said the 13 year term would strike a reasonable balance between providing protection for the UK pharmaceutical industry and maintaining competition from generic products. The Association of the British Pharmaceutical Industry has taken the strongest exception to this view and says long term damage to industry could be the result. As arguably Britain's most successful "high tech" industry in terms of exports, it feels it deserves better treatment. And for once the bureaucrats in Brussels seem to be offering something better than Government apparently wants. As always the question of cost to the NHS seems to loom large in the Government's thoughts, but as the ABPI points out, because of the PPRS the cost implications to the NHS are broadly neutral. The Government's position in only going halfway to meet the industry's wishes has not been adequately explained and seems difficult to justify.

Certainly the British Generic Manufacturers Association did not appear to be merely paying lip service to their branded brothers (p631) when chairman Steve Stocks said he had no complaints that the patent life of new branded medicines limited the proportion of the market generics could occupy.

The Government is pleased with the increasing proportion of the drugs bill taken by generics — the proportion of prescriptions dispensed as generics has more than doubled from 16 per cent in 1979 to 37 per cent in 1990 with a quadrupling of the generic value. It foresees continuing growth and wishes to foster competition (p631) between generics and brands and generic manufacturers.

Generic prices must also rise with the introduction of original pack dispensing sought by the BGMA (p631) — the Government has undertaken to look again at OPs. Certainly, it will make the proposed EC pack labelling requirements attainable, and may well increase the generic share of the market as BGMA suggests, because of increased GP confidence in the products. But the Government will have to accept that OPs cost more and balance the cost against savings on brands.

ABPI slams Government on 13 year patent term...

The Government has been warned that Britain's pharmaceutical industry could be damaged by its proposals to limit the effective patent life for drugs to 13 years.

Ministers have already conceded that they may have to accept a somewhat longer period to secure a successful outcome to negotiations in Brussels over the proposal by the European Commission which would provide an effective patent protection period of 16 years.

The Association of the British Pharmaceutical Industry has expressed "incredulity" that the Government had failed to give full support to the Commission's proposal to restore patent rights by means of a supplementary protection certificate. ABPI director Dr John Griffin said research into many therapeutic areas that required a long term commitment would suffer.

The Government's position was all the more difficult to accept since the Pharmaceutical Price Regulation Scheme would operate — of any duration — cost neutral to the NHS, the ABPI claims. Generic firms all recognised that the research-based industry was its "seed corn" and if it was not successful they would suffer in the long term.

In Europe, even if the full 16 years protection were to be granted to the first member state to license a new medicine, much less protection would be achieved in other countries where the product's introduction could be delayed by regulatory procedures, the ABPI says. It hopes the Government will modify its stance to support the Commission's proposals before a final decision is taken by the Council of Ministers.

Opening a debate on the issue in the House of Lords on Monday, Lord Hacking (independent) accused the Government of being unfair by placing too much emphasis on the cost of drugs to the NHS — currently £3 billion a year. He emphasised that many medicines actually led to cost savings by enabling treatment to be given on an out-patient basis.

Lord Hacking was supported by Lord Williams of Elvel, deputy Labour leader in the Lords, in questioning whether the Government's proposal would in fact provide a 13 year period of

patent protection. The anti-inflammatory Feldene was cited as an example of a product which had enjoyed patent protection of only four years. If the Government maintained its present position "the only result will be that we shall handicap a major industry", he said.

Lord Hesketh maintained that 13 years effective patent protection would be closer to the practice followed by the US and Japan than the 16 years favoured

by the EC. It would also strike a reasonable balance between providing protection for the UK pharmaceutical industry while maintaining competition from generic products.

At the same time Lord Hesketh insisted that the Government fully accepted that companies should be protected "from so severe an erosion of their market position as to undermine a proper return on their investment".

...and still unhappy over NHS reforms

The pharmaceutical industry is unhappy over the stance the Government has taken over patent term restoration and still has doubts over the NHS reforms, John Farrant, president of the Association of the British Pharmaceutical Industry, made clear last week.

"We cannot understand why the Government appears to be so frightened that by granting the full 16 year patent term restoration proposed by the European Commission, it may be giving British companies a more generous regime than that given to our American competitors seven years ago," he told Health Minister Virginia Bottomley at the Association's annual dinner.

Anticipating a statement in the House of Lords on the Government's position (above), which only goes part of the way to meeting the industry's expectations, Mr Farrant asked: "Why is the Government so anxious to look backwards at legislation passed in the US in 1984? Why not be more positive? There is a very convincing case for outright Government support, and this industry deserves it."

The industry's doubts over the NHS reforms remain, said Mr Farrant. Some health service managers and independent medical advisers still see indicative amounts as a means of cutting costs rather than achieving more cost effective prescribing, he said.

He also took a swipe at critics of the pharmaceutical industry. It was amazing, he said, that after the revelations about the appalling

standards in Eastern Europe there are still those who believe that central intervention and control can supply people's medicines better than the market.

The industry contributed £1,100 million to the balance of trade last year, and new medicines can provide dramatically better and often cheaper healthcare, said Mr Farrant. He dismissed arguments that the industry markets too many different products and wastes research resources through duplication.

A wide range of products is good for both patient and doctor — it ensures progress. And it is competition that drives an R&D based organisation to work fast and efficiently to bring new medicines onto the market.

On the patents issue Health Minister Virginia Bottomley said it would have been easier if discussion in Europe had been more closely integrated with other pharmaceutical initiatives. "We may not agree exactly on what in detailed terms is implied by the word 'restoration', but I suspect there will be little difference between us on the principle of a safeguard against too severe an erosion of market life," she said.

The Medicines Control Agency has become the fastest agency in the world for the licensing of new drugs and has quickly become an outstanding success, said Mrs Bottomley. It has made a significant contribution on European issues and has consulted and taken account of industry concerns whenever possible.

SHEFFIELD LOCAL
PHARMACEUTICAL COMMITTEE

Guidelines for Good Prescribing Practice



This year, the 105
pharmacies in Sheffield
will dispense around
5 MILLION PRESCRIPTIONS
at a cost of nearly £30M!!

Guidance sent to GPs

In a new initiative to cut down on wastage and provide a better service to patients, Sheffield Local Pharmaceutical Committee has sent a "Guide to good prescribing practice" to every GP in the city.

The guide is aimed at avoiding errors in prescription writing and cut down on wastage. Sections include basic rules for all prescriptions, guidelines on quantities to be issued, prescribing for overseas visits and holidays, multiple prescribing, "your local pharmacist", blacklisted drugs, CD scripts, and emergency supplies.

"Since the new GP contract came in we have had a number of GPs move from 28 days prescribing to 84 days, and we were looking at a way of bringing it to their notice without being a straightforward moan about prescribing period," LPC secretary Martin Bennett told C&D. "And with indicative prescribing amounts coming in on April 1, the GPs are a little more receptive about prescribing costs."

Mr Bennett says the LPC decided to get on with it, rather than go through endless committees. They had as a model two earlier initiatives from Cheshire LMC/LPC and Lincolnshire FPC. Other LPCs who may be interested in having a look at the Sheffield leaflet should write to Mr Bennett at Associated Chemists (Wicker) Ltd, 61-71 Wicker, Sheffield S3 8HT.

"The LPC will be taking further initiatives with regard to putting the extended role into practice based on the Society's evidence to the Department of Health's working party," he says.

Guild wants quick answer to new claim

The Guild of Hospital Pharmacists is claiming 12.8 per cent on all points of the current pay spine and all agreed allowances for the year beginning April 1, 1991. The staff side team have also asked for a response to the claim within four weeks in a bid to avoid a long drawn out settlement.

"Last year the response took four months and that is one of the reasons why we have gone in a bit more strongly this year," says staff side chairman Bob Timson.

Mr Timson says the claim includes an element to cover the size of the award last year compared to inflation over the period, and notes the size of the awards made by the review bodies. It also includes a couple of per cent "productivity" to reflect "hospital pharmacists continuing success in initiatives aimed at influencing drugs expenditure."

The claim also includes a call to re-establish special duty and late clinic payments linked to the minimum of grade D — "staff pharmacist" — salary; an agreement on study leave made "in principle" over a year ago; a reduction in the working week from 39 to 37 hours; a 12.8 per cent increase in London weighting, and an extension of the grade B scale.



PSNC to meet Waldegrave on pay

The Pharmaceutical Services Negotiating Committee is to meet with Health Secretary William Waldegrave on April 22 having rejected a revised pay offer from the Department of Health last week for 1991-92.

The new offer was outlined to the Committee by Permanent Secretary Brian Bridges following the rejection earlier this year of an 8.5 per cent offer, at which stage a meeting with Mr Waldegrave

was sought. PSNC will give no details of the latest proposal.

The full PSNC will reconvene on April 25 to discuss the outcome of the meeting with Mr Waldegrave.

PSNC chairman David Sharpe says the delay in reaching a settlement with the DoH will mean that April scripts will be priced at the current rate. "Any amount outstanding for April will be made up at a later date."

No price controls says Minister

Mrs Virginia Bottomley, the Health Minister, made it clear on Monday that the Government would oppose any attempt by the EC to impose controls on the prices and profits of the drug industry.

She said the Government aimed to ensure that patients received safe medicines at an acceptable cost to the taxpayer while encouraging rational prescribing.

The Government, she said, also wished to promote the development of a competitive pharmaceutical market while supporting research.

Mrs Bottomley stressed: "We do not want the Commission to impose a rigid framework on the market that inhibits further development of open competition."

The Minister also emphasised the considerable differences in the arrangements made by the 12 Member States of the EC for controlling drug expenditure.

"The Government considers that a prescriptive central approach to price and profit controls should be avoided."

Reaffirming the Government's determination to counter attempts by the Commission to extend its powers, Mrs Bottomley insisted: "Matters to do with the organisation and financing of healthcare are for member states."

She clarified the Government's attitude in responding to a questionnaire from the EC which will be discussed further in June.

Savings of £50m from generic OPs

The British Generic Manufacturers Association says its research shows GPs would be likely to prescribe 5 per cent more generics if they were available in original packs, a saving to the NHS of £50 million a year.

Chairman Steve Stocks says the BGMA believes the Government would actually save around £100m: "This artificial constraint on the size of the

generic market is bad for us and bad for the NHS."

Mr Stocks says OPDs are good for the patient, allowing ready access to information which would otherwise be missing or mislaid. "Perhaps, more importantly, patients with OPDs will know who the manufacturer is and, if something goes wrong, who is liable."

Mr Stocks told guests at the BGMA annual dinner that if the EC adopted its draft medicine labelling directive, with its five page listing of information to be included either on-pack or on patient information leaflets, then manufacturers would only be able to comply if the information could be supplied as part of an OPD.

"If the UK industry is to retain its prime position in Europe, and if the generics sector is to prosper, we shall have to produce our products in original packs. We urge the Government to act."

Mr Stocks said he was pleased the Department is again to consult the profession on the

recommendation of the joint sub-committee that pharmacists should invariably dispense drugs in whole numbers of OPs.

Under Secretary Lady Hooper said the Government was looking to competition between alternatives to original branded products and between generic suppliers to increase value for money for taxpayers.

Lady Hooper gave the Government's response to an EC questionnaire: "The UK Government attaches importance to the competition that comes from availability of generic products. Competition from such products once patent term ends is the counterpart of the necessary protection of intellectual property rights. The UK observes that there are major differences in the availability and use of generics between Member States. It might be considered whether regulations affecting the marketing and availability of generic products provide a barrier to free movement."



Baroness Hooper with BGMA chairman Steve Stocks

Baby food: 'low in nutrients and poor value for money'

Many shop-bought baby foods are low in nutrients and poor value for money, according to a Food Commission report.

The report, published in the April issue of *The Food Magazine*, claims that added water and thickeners means that many foods fail to meet minimum nutrient levels.

Researchers analysed 172 products for older babies and found that 40 per cent did not contain sufficient calories and 39 per cent of savoury dishes failed to meet protein recommendations.

In terms of specific brands, 34 out of 54 Heinz products analysed failed to meet calorie requirements as did 18 out of 24 Cow & Gate Junior products.

Some 20 out of 23 Milupa products did not contain sufficient protein. All Farley's Mealtimers studied contained thickener or bulking agents.

The standards used to judge the foods were those of the European Society for Paediatric Gastroenterology and Nutrition (ESPGAN).

Laboratory tests found that meat levels in dishes were often lower than parents expected. According to a survey of shoppers, most expected meat levels of 25-30 per cent, yet only two out of 23 dishes tested contained more than 20 per cent meat. Two beef dishes tested positive for chicken meat although chicken was not listed among the

ingredients, claims the report.

"Despite all the reassuring phrases printed on the labels of these products, parents would generally do better to puree their own food and give it to their babies," says the report.

Manufacturers have reacted angrily to the report: Cow & Gate point out that the nutritional status of weaning infants in this country has never been better.

Cow & Gate have declined to comment further until they have independent findings from another source.

Farley's have responded to the article by saying: "The *Food Magazine* report is based on the basic assumption that we would recommend that Farley's Meal

Timers range is fed to the exclusion of all other intake yet we quite clearly state on the pack that baby should be given all usual milk feeds and cool, boiled water. The *Food Magazine* then goes on to measure up the Timers range as a baby's total dietary intake which in itself is an invalid assumption."

Farley's Timers, when correctly reconstituted, supply about 100kcal per 100g, say Crookes. Although the *Food Magazine* has stated that six of the Timers range have less protein than recommended by the ESPGAN Committee, these guidelines apply only to products containing meat or fish, of which there are only four varieties in the Timers' range.

The composition of the Timers' products was established on the basis of UK recommended daily allowances (RDAs) and they provide adequate protein in conjunction with the baby's infant milk or follow-on milk, say Crookes.

PAGB to lobby on EC advert proposals

The Proprietary Association of Great Britain renewed its attack on the proposed format of the Pharmaceutical Advertising Directive on which the European Parliament will be asked to vote in June (*C&D* last week p582).

If unchallenged the proposals will result in advertisements of no demonstrable consumer benefit; nor can they be justified as a means of removing barriers to trade, the PAGB said on Monday.

The proposed Directive goes further than existing practices in any of the other Community states, the PAGB says. The only country which insisted on data sheet type information being carried on adverts was West Germany which dropped the requirement in May 1989 after it was shown to be ineffective.

The PAGB plans an intensive couple of months lobbying MEPs before the June vote. The findings of the research the Association commissioned through Taylor Nelson — which shows that recall of full label information is poor compared to a reminder to "Always read the label" and that the presence of text decreases communication of the main points of the commercial — will be used to put the industry's case.

The Medicines Control Agency confirmed to the PAGB on Monday that its attitude towards the proposed Directive has not changed. It was generally unenthusiastic about the Directive when it was proposed, but supports the PAGB view that

adverts should carry a reference to read on-pack instructions. The Labelling and Leaflet Directive goes for voting on April 25.

Industry representatives have greeted the proposals with dismay. "Last week's news confirmed our worst fears that we'd end up with too much information in our advertising," said Martin Phillips, Crookes' head of marketing for healthcare.

"People need different information at different times. Only when they come to buy the product do they need full details. To get that when they are not in the purchasing situation detracts from the simple message of what the product is for.

"As an industry we are all strongly lobbying against it," he continued, adding that even the consumer lobby was anxious to see the right information in the right place, that is, on the packet.

Colston Herbert, Sterling Health's chief executive, told *C&D* he thought the proposals would be disastrous both to the industry and to the Government's plans to encourage self-medication. Consumer confidence would be undermined and growth in the OTC medicine industry held back, he believed. One recommendation was that advertising mentioning the symptoms of illness for which the product was intended should be banned, and he wondered how one could advertise a medicine without mentioning the symptoms it was supposed to treat.

Book scans 150 years

The Royal Pharmaceutical Society of Great Britain this week celebrated its sesquicentenary with the launch of a political and social history of the Society published 150 years to the day from its founding on April 15, 1841.

President Linda Stone, proposing a toast to the RPSGB at the book's launch, talked of the Society's achievements and said its work went on: "The future will bring great challenges in the fields of education and training, the pharmaceutical sciences and the scope of professional practice. I know that the pharmaceutical profession will meet these challenges with confidence."

Mrs Stone said that in establishing a learned society and a professional body, the RPSGB's forefathers set themselves the objective of creating a self-governing profession in the pursuit of excellence. "It is right for a forward-looking profession to look back in pride at such a history of achievement."

"The Royal Pharmaceutical Society of Great Britain 1841-1991: A Political and Social History" by S.W.F. Holloway is published by the Pharmaceutical Press at £35 (clothbound pp464, ISBN 0 85369 244 0). The president says the book, commissioned two years ago by the Society, fixes the origins and development of the pharmaceutical profession within a "vividly drawn" social context. "Mr Holloway brings us the



President Linda Stone

colour and culture of Victorian England; the great social changes of the new century, and the public expectations that accompanied the birth of the NHS."

The book is lavishly illustrated in black and white with RPSGB archive material and has chapters on founder Jacob Bell, the chemist and druggist, 1750-1870, the foundation of the Pharmaceutical Society, the 1852, 1868 and 1908 Pharmacy Acts, and from National Health Insurance to National Health Service. There is also an epilogue on the Society as it is today and an appendix on presidents and secretaries.

The chairman of the Long-Term Medical Conditions Alliance is Miss Susan Knibbs, not as stated (*C&D*, last week, p584).

Public warned about antibiotics

Of the 50 million antibiotic prescriptions written in the UK each year, 80 per cent may be unnecessary, according to ITV's "World in Action" programme, which warned the public about the dangers of overusing antibiotics.

The problem of resistance was highlighted: "Years of overuse have created a new strain of superbug," the programme said. Vancomycin is still effective against these "superbugs", but doctors fear that one day it will cease to work.

Hospitals are in the frontline, and one in ten infections are contracted in hospitals from cross infection. Treating epidemics caused by resistance puts a strain on the NHS' financial and manpower resources.

Far too many antibiotics are available, "World in Action" said. Companies criticised included Beecham, for introducing new products that were modifications of patent expired brands, Wellcome, whose Septrin was called "a dangerous drug" and Bayer for Ciproxin.

The top ten prescribed antibiotics were identified as Amoxil 8.5m; amoxycillin 4.5m; penicillin 4.5m; Erythroped 2.5m; oxytetracycline 2m; erythromycin 2m; Augmentin 1.4m; Septrin 1.5m; trimethoprim 1.25m and ampicillin 1m. The public was urged not to press GPs for scripts.

Deregulation of Nicorette

The long-awaited deregulation of Nicorette 2mg from POM to P status will occur on May 1.

Health Minister Virginia Bottomley has confirmed that, from next month, pharmacists will be able to supply the 2mg strength of a nicotine chewing gum, licensed as an aid to smoking cessation, without a prescription.

Aspirin, paracetamol and codeine tablets: With effect from May 1 this compound preparation will be deleted from Part VIII of the Drug Tariff. From that date Veganin tablets may not be dispensed against an order for aspirin, paracetamol and codeine tablets on Form FP10, says the PSNC. **Labour's policy document,** published earlier this week, includes an undertaking to phase out VAT on sanitary towels and tampons.

TOPICAL REFLECTIONS

by Xrayser

OPD now a farce?

Original pack dispensing is becoming a farce. Now Alan Smith has joined the fray on behalf of the British Generic Manufacturers Association by accusing the Government of procrastination over the legislation necessary to enforce the use of original packs (*Guardian* April 10). The problem however, is not simple as is evident from the multiplicity of packs on the market, the inability of the medical profession to prescribe in unit quantities, and the obvious cost economies of bulk packs in the competitive generics market.

As a community pharmacist I can only look on with disbelief at the ostrich-like attitude all in authority are taking. With the imminent arrival of "1992" this problem will become infinitely worse, but if dispensing in original packs is to be a community wide requirement, then legislation must be introduced now, to enforce the change.

Alternative data

The Pharmacy Health Care scheme has bombarded me with hundreds of leaflets since its inception. I find that patients now watch the stand for new arrivals.

This month's contribution concentrated on the problem of identifying hidden medical conditions in cases where the patient is unable to communicate with medical personnel. Tallisman bracelets have been available for many years, as have warning cards, but "Medic Alert" is a positive advance in that it holds information about patients' medical problems which have been validated by their own doctor. The computer data bank can be accessed, in emergency, 24hrs a day, but only by *bona fide* medical personnel using the identification and telephone numbers engraved on a bracelet or necklet worn by the patient.



The system is run by a registered charity and for a one-off fee of £26 is an invaluable peace of mind insurance for those at risk. So far 130,000 members have been registered but the aim is nearer 1 million. With our help I am sure that number can quickly be achieved.

Roles now clearer?

It has taken me a week to digest the report on the conference on the future role of the community pharmaceutical services (*C&D*, April 6), and if its ideas are implemented as I anticipate they will be, then this heralds a revolution in community pharmacy.

The days when the pharmacist hid in his little back room producing miracles in bottles have now gone and the more diverse functions of patient counselling, adverse reaction reports, PACT data analysis, counter prescribing, domiciliary visits, residential home supervision, diagnostic testing, drug abuse, health education, pharmacy formularies, lifestyle monitoring etc, will become our future role.

A roller coaster of ideas for our future practice, but without any indication of how this might be achieved within the confines of the new market orientated NHS. The probability of achieving new money is remote so a re-definition of the basis of payment appears inevitable but, with independent pharmacies still dependent on the NHS for 70 per cent of their income, that redefinition must be negotiated in the public domain and not behind closed doors.

Community pharmacists are keen to plan for their professional future but they can only do so within a framework of defined objectives and financial security. The objectives are becoming clearer but the means to attain them, are still very uncertain.

SCRIPT SPECIALS

Neupogen: a new approach to neutropenia



Neutropenia is a major factor contributing to infection, morbidity, mortality, and underdose in patients undergoing chemotherapy for cancer.

Neupogen is the first haematopoietic growth factor to be licensed for the reduction in the duration of neutropenia in patients with established cytotoxic chemotherapy for non-myeloid malignancy.

It has been developed by Californian biotechnology company Amgen Inc and Roche Products Ltd, and will be marketed jointly in the UK.

Neupogen (filgrastim) is non-glycosylated re-combinant methionyl human granulocyte colony stimulating factor (G-CSF). It promotes the proliferation and differentiation of neutrophil precursors and therefore accelerates neutrophil count recovery after chemotherapy. The risk of infection and the need for hospitalisation for intensive antibiotic therapy are thus said to be reduced.

Clinical studies have demonstrated that by reducing the incidence of neutropenia, Neupogen can significantly increase the number of patients completing their course of cytotoxic drugs at full dose and without interruption or delay. It is hoped that maximising the benefits of anti-cancer treatments will help to improve survival rates for certain types of cancer.

Neupogen is available for

hospital and community use. Since it can be administered subcutaneously, it can be given at home by community nursing staff, relatives, carers or, in some situations, by the patient.

Neupogen is provided as a sterile, colourless solution which can be administered either intravenously or subcutaneously. Two vial sizes are available: Neupogen 30 contains 30 million units (mu)/300mcg of G-CSF in 1ml extractable volume (5 £395) and Neupogen 48 contains 48mu/480mcg in 1.6ml (5 £630, both prices trade).

The recommended dose is 0.5mu/kg/day. The first dose should be given not less than 24 hours after cytotoxic chemotherapy. If required Neupogen may be diluted in 5 per cent glucose intravenous solution.

Daily dosing with Neupogen should continue until the expected neutrophil nadir is passed and the neutrophil count has recovered to the normal range. This usually takes up to 14 days, depending on the type, dose and schedule of cytotoxic chemotherapy used.

For contraindications and warnings see Data Sheet. Side-effects of Neupogen are minimal and this is attributed to its acting at a late stage in the haematopoietic cascade.

Some patients experience mild to moderate musculoskeletal pain which can be treated effectively with standard analgesics. Transient changes in levels of alkaline phosphatase, lactate

dehydrogenase, serum uric acid and gamma-glutamyl transpeptidase have been reported.

In contrast to some other haematopoietic growth factors, Neupogen has not been associated with fever which might mask the onset of impending infection.

Neupogen is a POM, licence number 0031/0268. It should be stored in a refrigerator at 2-8 degrees C. Amgen Roche. Tel: 0707 328128.

Isoket still in the B.N.F.

Schwarz Pharma wish to point out that the latest edition of the *British National Formulary* (March 1991), which states that Isoket has been withdrawn, is inaccurate. Only Isoket 5mg, 10mg and 20mg tablets have been discontinued; Isoket iv (0.1 and 0.05 per cent) and Isoket retard 20mg and 40mg are still available. Schwarz Pharma Ltd. Tel: 0494 772071.

Oramorph concentrated packaging improved

Boehringer Ingelheim have made a number of changes to the packaging of Oramorph concentrated oral solution.

The new bottle for both pack sizes is squatter, making it easier to withdraw doses when the bottle is nearly empty and reducing residual volume. The mouth of the bottle now fits the adaptor for Baxa oral syringes enabling doses to be measured in this way if preferred.

The child resistant cap on the dropper has been replaced by an ordinary screw cap. This change was made in response to reports that some patients, especially the

Crookes' Wash E45 has been approved by the ACBS for eczema, xeroderma, ichthyosis and senile pruritis with dry skin. Crookes Healthcare Ltd. Tel: 0602 507431.

Ciba-Geigy are introducing a colour-free formulation of Anafranil syrup 25mg/5ml (150ml). Packaging will be flashed with this information. Voltarol Emulgel is available in a 20g hospital pack (£1.55 trade). Ciba-Geigy Pharmaceuticals. Tel: 0403 50101.

Retrovir iv infusion (10ml by five £54.29 trade) is now a licensed product available on a normal supply basis. The Wellcome Foundation Ltd. Tel: 0270 583151.

Coloplast's pc3,000 drainable ostomy system is now available on the Drug Tariff. Coloplast Ltd. Tel: 0733 239898.

Evans Medical are now supplying all of Wellcome's human vaccines. Evans Medical Ltd. Tel: 0270 583151.

IMS have launched bretylium tosylate 50mg/ml in Min-i-jet pre-filled syringes (10ml by 25 £25.16 trade). It is indicated for the treatment of severe or life-threatening ventricular arrhythmias. Its use is limited to coronary or intensive-care units. International Medication Systems (UK) Ltd. Tel: 0327 703231.

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Name _____ Position _____ Company _____
Address _____ Tel. _____

COUNTERPOINTS

Full Marks now in lotion

Napp are launching Full Marks lotion, which joins the shampoo variant in the range. Full Marks contains phenothrin 0.2 per cent, and is the first pyrethroid lotion for the treatment of head lice, say Napp.

The lotion (55ml £2.15, 110ml £4.09) is a clear, colourless, lotion. Like 100 per cent alcohol-based malathion and carbaryl lotions, it evaporates to leave a high concentration of insecticide; trials have shown it to be at least as effective, say Napp.

In addition, the aqueous component of the formulation is said to offer a more tolerable and user-friendly product.

The lotion should be sprinkled on to dry hair, rubbed in gently, and allowed to dry naturally. The hair may be shampooed after two hours, after which the dead lice and eggs should be removed with a fine-toothed comb.

Napp expect that Full Marks lotion will be incorporated into Health Authority Rotational Policy. North West Thames has already agreed to place it on schedule from September 1. *Napp Consumer Products Division. Tel: 0923 424444.*

Support for Migraleve

Charwell Pharmaceuticals are supporting Migraleve with a new advertising campaign directed at GPs, complete with a full promotional package.

The £350,000 campaign, which will run throughout the year, also promotes the new 48 pack size.

The below the line support includes a counter display unit, shelf strips and Press advertising.

Migraleve holds a 5.5 per cent share of the £62.7 million pharmacy oral analgesics market and showed steady growth within this sector last year, say *Charwell Pharmaceuticals Ltd. Tel: 0420 84801.*



Dendron's Ibuleve is OTC ibuprofen gel

Dendron are launching Ibuleve ibuprofen gel, hailing it as the first topical ibuprofen product to be promoted directly to the public.

Ibuleve (30g tube £3.49) is formulated for the relief of backache, rheumatic and muscular pain, sprains and strains.

It is fragrance-free and colourless and can be applied up to three times daily. Dendron are supporting the launch with an advertising campaign in the national Press, and a pharmacy promotion. *Dendron Ltd. Tel: 0923 229251.*



Merrell announce plans for hayfever lines

"The largest support package ever on a hay fever brand" is how Merrell Dow are describing their

Summer plans for Seldane.

With a total spend of over £2 million, the company is aiming to

make Seldane the "most heavily advertised brand in the entire hay fever sector", says group product manager Andrew Tasker. Advertising plans include television, radio, national Press and women's magazines.

A flexible arrangement has been reached so that Merrell Dow can start the campaign at short notice, to coincide with the hay fever season.

A new advertisement featuring Chuck the Bee will be screened in London, Central, Granada and Central Scotland areas, estimated to reach approximately 75 per cent of hay fever sufferers.

The strategy for Triludan and Triludan Forte will involve building the market share by encouraging pharmacist recommendation and working with assistants to increase their education, says Mr Tasker.

A new pack design with stronger colours has been introduced which will increase impact on-shelf. Point of sale material for both brands will include dummy packs, a range of counter dispensers and window and door stickers. Triludan patient leaflets are also available.

Trade support will include bonus stock packages and what Mr Tasker calls Merrell Dow's largest ever trade incentive programme. A competition will run with the number of entries linked to display. First prize is a Peugeot 205 CJ and two runners up will receive a weekend break for two. All pharmacists agreeing to a minimum display criteria will receive a Summer holdall.

The company also plans Summer support for their lozenges — Merothol, Merocaine and Merocets, and the analgesic Syndol. According to Maire O'Reilly, marketing assistant, the emphasis will be on efficacy and profitability. A 50 per cent profit margin is available along with bonus deals, in-store POS and consumer advertising. A Merothol sampling campaign is also planned.

In addition, packs of Kleenex tissues, in store from the first week in May, will feature a hay-fever survival kit which customers can obtain for three tear-out ovals. *Merrell Dow Pharmaceuticals Ltd. Tel: 081-848 3456.*

Nivea gets sampling support

Smith & Nephew are supporting their Nivea haircare range with a national promotion.

A sampling campaign will reach 750,000 current Nivea skincare users. Sachets will contain either Nivea shampoo or conditioner and contain a 20p money off coupon redeemable against either product. *Smith & Nephew Consumer Products. Tel: 021-327 4750.*

Family offer from Vosene

Vosene shampoo will be supported by a television campaign and on-pack offer throughout Spring.

The television commercial, featuring Kevin on his first date, will be shown again during May as part of a £2 million spend.

From April 22 until the end of June, Vosene 150ml and 300ml will contain a 25ml tube of Aquafresh toothpaste free, selected for its "mass appeal and fun family heritage". Aquafresh is being supported by a television campaign to the tune of £1.5m which runs until the end of April. *Smithkline Beecham Personal Care UK. Tel: 081-560 5151.*

Synergie on national TV

Garnier are investing £1.3 million in a national television campaign for their Synergie skincare range, part of their £2m support package.

Starting on April 22 and running for five weeks in all TV regions, it focuses on "the alliance with science with nature" concept, shows the entire range and features top model Tatiana Patitz. *Laboratoires Garnier. tel: 071-937 5454.*

Bill Hamilton is sales and marketing controller at Creightons Naturally, and not as stated in *C&D* April 6, p555. Creightons have a strict policy of non-animal testing and do not use ingredients that have been tested on animals. They are members of the British Union for the Abolition of Vivisection. *Creightons Naturally plc. Tel: 0903 745611.*

Brylcreem cuts new ground with Sensus

Smithkline Beecham have added a range of shaving products to their Brylcreem range. Called Brylcreem Sensus, it is designed "for the 42 per cent of adult males who claim to have sensitive skin", says the company.

The range comprises shave foam (200ml £1.89), shaving gel (200ml £2.29), aftershave mousse (150ml £3.49), aftershave gel (75ml £3.49) and moisturising cream (50ml £3.49).

Each product in the range has been formulated to include a balance of lubricating and moisturising ingredients designed to protect sensitive skin from cuts and irritation related to shaving, say SB. Ingredients include anthemile and allantoin.

The new range will be supported by Press and PR support, targeting 24-35 year old



men. The advertising, which will run throughout the year, includes a national Press campaign.

Despite the fact that 10 per cent of total skincare purchases are made by men, and 16 per cent of total usage is accounted for by men, only 1 per cent of all skincare products are aimed at men, claim *Smithkline Beecham Personal Care UK. Tel: 081-560 5151.*



'Styling by you, protection by Silvikrin'

Smithkline Beecham have brought out a new Silvikrin hair styling range, Active Care, which claims to offer protection as well as styling benefits.

The range comprises three mousses - firm hold, ultra hold and revitalising for permed and curly hair. All contain polymers to help protect hair from damage caused by styling, say Smithkline Beecham. A gel spray with conditioning agents has been added along with a fixing spray, said to leave hair tangle-free. All products cost £1.99.

The packs are pearlescent green with bold graphics featuring the Silvikrin leaf motif.

To support the range Smithkline Beecham are investing £2.1 million in a national television campaign, which breaks in July. The new commercial features Twiggy and proposes "Styling by you, protection by Silvikrin". It will be part of a total £3.3m spend on the whole brand and will run alongside the other Silvikrin commercials.

Additional promotional activity will include sampling, advertorials

and offers.

Smithkline Beecham say styling products form the fastest growing sector of the haircare market, and forecast it will grow by 25 per cent in sterling terms this year. *Smithkline Beecham Personal Care. Tel: 081-560 5151.*

Gentle cleansing from Klorane

Pierre Fabre have added Dermocare cleansing bars to their Klorane skincare range.

There are three variants - vitamin F enriched and fragrance-free for sensitive skin; with saponins to protect and moisturise combination skin; and with soya lecithin for dry skin.

The 100g bars retail at £2.30 and come in sixes at a trade price of £7.83. *Pierre Fabre Ltd. Tel: 0865 742525.*

Wisdom launch Mr Men kits

Wisdom have produced a children's dental kit, featuring the Mr Men characters, containing a toothbrush and a tube of toothpaste.

The brushes carry pictures of Mr Happy, Mr Bump, Mr Tickle, Mr Impossible, Mr Chatterbox and Mr Strong. They have easy grip-to-handles, say Wisdom, and are available in bright blue, orange, red and yellow.

The brushes are packed with a 25ml tube of fluoride toothpaste. The kits, retailing at £1.52, are available in trays of one dozen. *Addis Ltd. Tel: 0992 584221.*

In the bag from Unichem

Unichem have added cosmetic purses and bags to their range of accessories.

Made in poly cotton and lined with PVC, they come in 12s in two colourways. The trade price of 12 cosmetic bags is £9.24 (rrp £1.49). *Unichem. Tel: 081-391 2323.*

Earth Day support

Montagne Jeunesse are supporting international Earth Day (April 22) with a radio broadcast and Press advertising.

Ex-chairman of the Green party, Pete Wilkinson, and environmental consultant for the company, will be interviewed on the BBC World Service and Greater London Radio.

A sampling offers and feature for the Montagne Jeunesse book *Antarctica: Voices from the Silent continent* will appear in the *Daily Mirror* Woman supplement on April 17. Other support includes book offers and Montagne Jeunesse information packs to all *TV Times* readers the week commencing April 20. *Addis Ltd.* Tel: 0992 584221.

Nurdin's Spring superdeals

A further selection of special offers and added-value packs is now available within the health, home and beauty sector with Nurdin & Peacock's latest promotion.

The "Superdeals" on offer include Parazone original bleach (750ml) at the 12 for 11 price of £4.63; a 12 x 11 outer of Head and Shoulders shampoo can be purchased for £7.99, with the retail price providing a margin of 21 per cent.

"Bestbuys" available include Hedex tablets in 16s together with two free Hedex 24s for £6.99, while Big D starch (12 x 300ml) is priced at just £6.13. Ajax cream cleanser (6 x 250ml) can be bought for £1.65. *Nurdin & Peacock plc.* Tel: 081-946 9111.

Free Ulti-Mam display

Mam's new Ulti-Mam orthodontic soother is now available in a free point of sale pack which displays 12 pairs.

The soother has special skincare features, including a pattern of dimples on the inside of the shield to allow airflow between the soother and baby's face.

Each pair is sold in a see-through pack (£2.49) which forms a carrying case after purchase. *Mam UK Ltd.* Tel: 021-459 4304.

Nivea gets new Visage skincare range

A new skincare range is being added to "the world's largest toiletries brand".

The Nivea Visage range consists of eight products for cleansing, daycare and nightcare. Smith & Nephew will be supporting the launch with a £4 million budget, the largest spend in Nivea's history.

The cleansing products are foaming facial wash (100ml, £2.99), refreshing cleansing lotion (200ml, £2.69) and perfume-free eye make-up remover (125ml, £2.95). Daycare products are active day moisturiser for normal/oily and normal/dry skin (50ml, £3.99) and moisturising fluid (100ml, £3.45), all containing UV-A and B sunscreens. The nightcare products are nourishing night cream (50ml, £4.45) and anti-wrinkle cream (50ml, £5.50).

A five week national television campaign starts mid-July with a £1.8m spend. There will also be Press advertising worth £0.2m, sampling costing £1m, public relations — including reader offers in women's magazines — worth £0.5m, and merchandising and



display material accounting for a further £0.5m. POS includes testers, leaflet dispensers, posters and window bills.

Nivea Visage is aimed at 25-35 year olds, predominantly married women and housewives, and is positioned in what Smith & Nephew regard as the premium regime (ie cleansers, toners and moisturisers) sector. An equivalent range marketed by Beiersdorf in France is the number one moisturising skincare brand in that country, the company says. The products have not been tested on animals. *Smith & Nephew Consumer Products.* Tel: 021-327 4750.



Super clean hands from Silvikrin

Silvikrin Supersoap Super cleansing gel, a heavy duty hand cleanser, joins other new launches from Smithkline Beecham this week.

The cleansing gel is an effective heavy duty cleanser, while being kind to skin because of its moisturising properties, says the company. It has a fresh scent and an anti-bacterial effect, and is suitable for all the family.

The clear blue gel comes in a pump dispenser with an easy wipe shrink sleeve featuring marbled

background and stylish graphics. The label stresses the gel is "Tough on grease and grime — kind to hands".

The cleansing gel sells for £1.59 for 250ml, equivalent to 150 servings. SB claim there are over 8 million users per week for such a product, but no brand targeted specifically at women or families.

As an introductory offer pharmacists can buy outers of six for £5.64. *Smithkline Beecham Personal Care.* Tel: 081-560 5151.

Fruity scents for Summer

Creighton's Naturally bring a whiff of Summer to the bathroom with the introduction of fruity new products.

The strawberry bath and shower range comprises bath gel (200ml £2.99), conditioning shampoo (200ml £2.50), soap (100g £1.15), bath seeds (30g £0.65, or four packs £2.45), and shower gel (250ml £2.50).

The shower gel, featuring a hook cap for ease of use, also comes in apple and peach fragrances. Packed in outers of six it has a trade price of £8.31. The range will fit into the company's free standing floor merchandiser. *Creightons Naturally plc.* Tel: 0903 745611.

BRIEFS

The distributors for Aydslim is Keyline Brands Ltd, 22 St Margarets Road, London W7 (tel: 081-579 8991), and not as stated in *C&D*, April 13 p592.

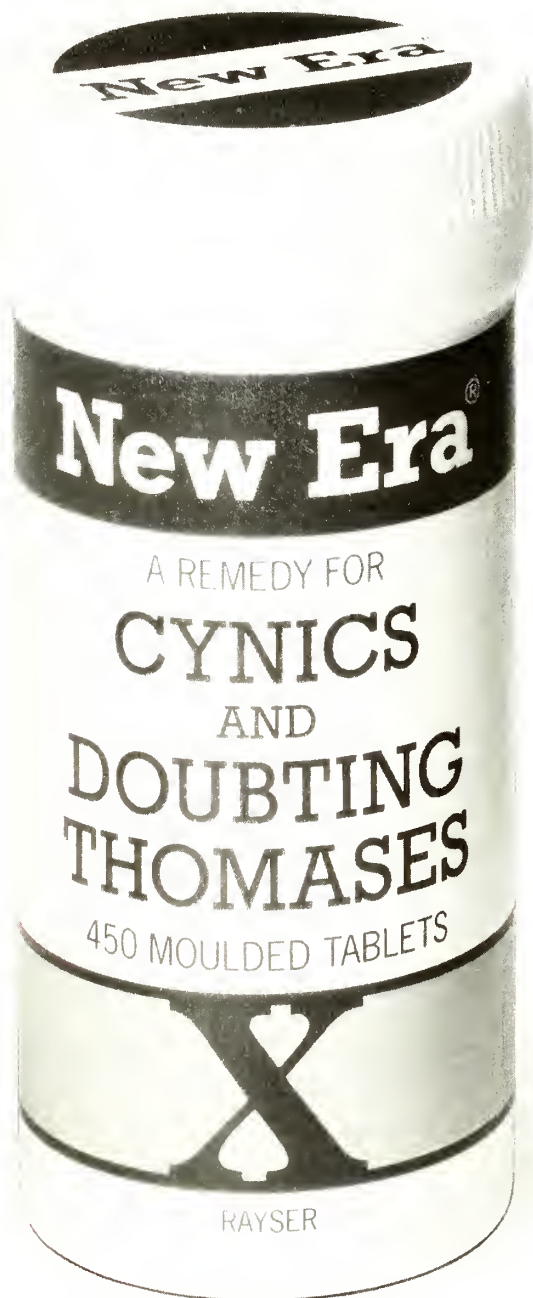
AAH Pharmaceuticals have joined with Sterling Health in a free telephone offer for their customers. To qualify for the gift, AAH customers must place an order for five or more packs which include at least one outer of Solpadeine 72s and Panadol Baby and Infant Suspension. The first 400 will receive a free telephone worth £24.99. *AAH Pharmaceuticals.* Tel: 0928 717070.

Bristol Myers are to introduce new labelling for Mr Muscle window cleaner, kitchen cleaner and bathroom cleaner and their respective refills — on-shelf mid April. The logo on the new label is 25 per cent larger and the rainbow which formed a part of the logo is now key to the design. *Bristol-Myers Co Ltd.* Tel: 0895 639911.

John Frieda have repackaged their haircare range. And for the introductory period, commencing July 3, consumers can claim a free bottle of Everyday shampoo and Bodifier, worth £2.95. The range is currently available only from Boots stores in the chemist sector. *John Frieda.* Tel: 071-437 7576.

Virotherm, the Healthcare Foundation's natural remedy for colds and hay fever, is now available through Unichem, AAH Pharmaceuticals, Medielite and Hamiltons. *Distributors, The Indigo Group.* Tel: 0273 623623.

Denivit toothpolish will feature in a national television advertising campaign until mid-May. The series of 160 advertisements will run on ITV and Channel 4. *Eyelure Nobel Ltd.* Tel: 0793 513600.



*"Scepticism is a thing of the past. In future I will
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alternative to conventional treatments."*

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IT'S ONLY NATURAL

Britannia's vegetarian supplement

Britannia Health have launched Capsules for Ecology, a vegetarian vitamin E supplement (200iu). The capsules are said to contain non-animal ingredients.

The supplement comes in new CapsEco, a vegetable-based capsule which sources ingredients from sea plants rather than animal products. The capsules are a combination of agar, sodium alginate and glycerine, and



disintegrate within 15 minutes, say the company.

They are also said to provide high bio-availability, giving higher blood levels of vitamin E when swallowed whole than when chewed. They come in 30's with an rrp of £3.49. *Britannia Health Products Ltd. Tel: 0737 773741.*

New formula Oz

Dendron are improving the formula of their Oz steam iron cleaner. It is said to provide more effective descaling and cleaning action in less than 20 minutes (50ml sachet £0.71).

The company is also running a kettle descaler promotion until the end of May, offering 50 per cent extra free. The range is currently being supported by advertising on Channel 4 and TV-am. *Dendron Ltd. Tel: 0923 229251.*

Gold Seal

Ever Ready have added two single cell packs to their range of Gold Seal batteries. The packs are on smaller cards than the two- and four-battery cards; this is to allow retailers to display both single LR14 and LR6 batteries on the same peg to maintain profit per square foot. The packs are available immediately, at a retail price of £1.52 (LR14) and £0.89 (LR6). *Unichem Ltd. Tel: 081-391 2323.*



Nouvelle goes midi with family size pack

Fort Sterling are adding to their Nouvelle range of 100 per cent recycled tissue products with the launch of a midi size pack of family tissues.

The midi sector has made a significant impact on the facial tissues market recently increasing its share to over 21 per cent of all family pack sales.

Nouvelle midi family tissues (125, £0.89) are said to be the first premium recycled tissue of its kind. They come in a pastel box also made from 100 per cent recycled cardboard, and feature

the Nouvelle burgundy lozenge on the perforated area.

Fort Sterling will be supporting the Nouvelle range with an on-pack promotion in April and May. Money-off coupons will be featured on some two million four-roll (15p) and two-roll (10p) packs of Nouvelle toilet tissue, redeemable against any products in the range.

A £1.25m television campaign, featuring a new commercial and supporting the whole range, starts in late April. *Fort Sterling Ltd. Tel: 0204 68611.*

ON TV NEXT WEEK

GTV Grampian	C4 Channel 4	TV-am Breakfast Television
B Border	U Ulster	STV Scotland (central)
BSB British Sky Broadcasting	G Granada	Y Yorkshire
C Central	A Anglia	HTV Wales & West
CTV Channel Islands	TSW South West	TVS South
LWT London Weekend	TTV Thames Television	TT Tyne Tees

Anadin Extra:	All areas except Y, CTV, & TTV
Denivit:	C4 & TV-am
Helene Curtis Salon Selectives:	All areas
Libra Bodyform:	All areas except CTV, LWT, TTV, C4
Macleans Mouthguard:	All areas except U, CTV, C4 & TV-am
Mum deodorant:	All areas
Nurofen/Nurofen Soluble:	All areas
Sure deodorant:	All areas
Synergie:	All areas
Slim-Fast:	G, Y, A, TT, C4 & TV-am
Tums:	All areas
Wrigley's Extra/Orbit sugar-free chewing gum	G

Breathe cleaner air!

Philips have entered the £14 million air cleaner/ioniser market with the launch of a range of three air cleaners. The HR 4385 (£249.99), HR 4383 (£119.19) and HR 4381 (£89.99) have a three-stage filtration system which

includes a washable pre-filter designed to trap airborne particles, a pleated filtrete filter which is electrostatically charged, and an active carbon filter.

The most powerful model in the range, the HR 4385, takes

ECO-friendly nappy disposal

A hygienic way of storing soiled disposable nappies has been developed by Process Improvements Ltd.

The Sanguenic system consists of a light, portable but sturdy plastic tub containing a cassette of strong plastic film. The dirty nappies are placed in the top of the tub and sealed in the plastic film by turning the lid. The unit holds about three days' supply of nappies.

It is emptied by opening the bottom of the tub, when a chain of sealed nappies can be removed and kept separate from other household waste. In this way, the producers believe Sanguenic can help overcome some of the environmental problems due to disposables. Each nappy is wrapped in the minimum of film, using less energy or materials than nappy bags, and the film can be reprocessed. Various pilot schemes for recycling disposables are underway and Process Improvements hope that, by isolating nappies from other recyclable refuse, Sanguenic will help these schemes become a commercial proposition.

Sanguenic will be advertised through Bounty and will be backed by sales promotion and public relations. Normally £24.95, it will be available at a special introductory price of £19.95 between July and October. A free cassette of film, which wraps up to 180 nappies, is included (refills £2.50).

The founders of Process Improvements, David Richards and Maurice Williams, have supplied products to the baby market since 1974 and set up the company especially to develop Sanguenic. The factory is based in Camberley, Surrey. *Process Improvements (1989) Ltd. Tel: 0276 684826.*

only 12 minutes to clean the air of a room of up to 12 cubic metres. It will be 90 per cent free of pollen in eight minutes and 90 per cent free of dust and cigarette smoke in 12 minutes, say Philips. The filters need to be changed about every three months.

The promotional package includes consumer advertising, an in-store video and brochures, a point-of-sale display unit and display stand, plus a training video and booklet for sales staff. *Philips Domestic Appliances. Tel: 081-689 2166.*



Sporting Summer t-shirt offer from Slazenger

Smithkline Beecham are promoting their Slazenger Sport range with an on-pack t-shirt offer for Summer.

With two proofs of purchase and £5.99 consumers can send off

for a white Slazenger branded polo shirt, featuring the Slazenger logo in navy. The shirt comes in extra large only. The offer runs until March 1992. *Smithkline Beecham Personal Care Tel: 081-560 5151.*

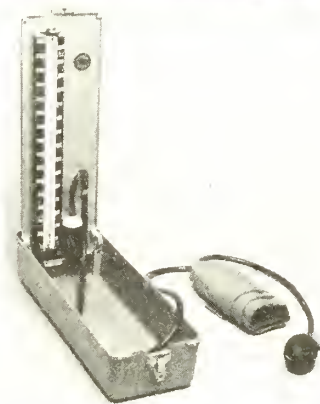
AAH medical practitioner range

AAH Pharmaceuticals are offering a range of medical practitioners' items as part of their strategy to help pharmacists develop new markets.

Previously, doctors requiring equipment for their practices obtained them via mail order companies. Now the AAH Healthcare centre in Kingswinford stocks a range of almost 800 items including stethoscopes, diagnostic kits, pen torches and ward screens.

Alan Turner, AAH's marketing manager, believes that pharmacists offering a service in this area will help cement the doctor-pharmacist relationship.

The area of medical practitioner equipment is a very ethical business for pharmacists, says Nigel Green, marketing manager for the Kingswinford Centre, and there is no stock holding commitment. The Centre acts as a warehouse and when ordered by a standard AAH code, the equipment can be put on the next van. Delivery is usually



within 72 hours for the more remote parts of the country, but much less for others.

Catalogues detailing the range are available at a cost of £10 for a pack of 5. As Mr Green explains, AAH do not want to distribute brochures for them to be left on the dispensary shelf.

Separate price lists will be published avoiding the need to repurchase brochures when prices change. Doctors are unable to order the lines direct.

"The key word for pharmacists for the next decade is specialisation," says Mr Green. "A little bit of time and a lot of weight will build results." *AAH Pharmaceuticals Ltd. Tel: 0928 717070.*

POTTER'S

When your customers ask for advice, do they sometimes mention herbal medicine?

And, being honest, do you have enough information at your fingertips to provide the answers?



Perhaps it would help if you owned a copy of Potter's Cyclopaedia which provides comprehensive in-depth references of hundreds of herbs.

Meanwhile we can tell you that as the result of the recent Government review over 100 Potter's products have been granted full licences.

There's never been a better opportunity to improve your herbal medicine business - and Potter's offers the experience, reputation and product range to meet your needs.



Potter's

Please send me the name of my local wholesaler ☐

Please send me an order form for Potter's Cyclopaedia at the special price of £9.99 (inc p+p) ☐

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PHARMACY ADDRESS _____

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CD/20/4

PILLS

— the every week story of pharmacy folk episode 57.

"A NEW LEASE OF LIFE"

said

Derek Bush M.R.Pharm.S. of Southend-on-Sea.

"PILLS has brought a new meaning to pharmacy. I am enjoying the job again. I feel that I am more of a benefit to the patient and my standing in the community has increased.

The leaflets give information that patients have a right to know, and they respond to the information given. One patient allergic to penicillin was forewarned that Amoxyl was in fact penicillin. Another recognised that he was suffering from a digoxin overdose."

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COUNTERPOINTS

Stylish new display for Alberto's VO5

Alberto Culver have brought out a new merchandising unit for their VO5 hair styling range. The unit will be available during May, and is designed to increase trial and brand awareness, says the company.

The refillable unit, in black to match the VO5 packaging, contains six 200ml extra hold hairspray, six each of the 100ml VO5 moisturising mousse and mega mousse (both with 20 per cent extra free), six each of 200ml sculpting gel spray and mega hold gel spray, and six 200ml VO5 curl booster.

The brand now claims to be the number two brand in the haircare market with growth of 16 per cent year on year.



Throughout May VO5 representatives will be calling on independent pharmacies, offering them the chance to benefit from the limited promotion, says Alberto Culver. Tel: 0256 57222.

Cachet gets trial size eau de toilette

Rimmel International are introducing a promotional size of their Cachet fragrance.

A 10ml bottle of Cachet eau de toilette spray retails at £2.99 and will feature a £1 money off coupon, redeemable against any purchase of Cachet 50ml eau de toilette. Ongoing research has unveiled the growing trend for sprays, says Cachet's brand manager Carolyn Ryan.

A trade parcel containing 18 trial bottles in a display unit with header card costs £29.70. Rimmel International Ltd. Tel: 071-637 1621.



VMS market healthy and growing

The vitamin, mineral and supplement (VMS) market has doubled in value since 1987 to £200 million, according to a Seven Seas report.

This is largely a response to more people living longer and demanding natural healthcare to maintain and improve their health. Awareness of natural healthcare is escalating as scientists prove the medical benefits of products such as fish oils, garlic and evening primrose oil.

The trend to health awareness has been developing rapidly over the past two decades, linked with concern about green issues and quality of life. Considerable growth for alternative remedies is foreseen during the 1990s.

Self-medication is on the increase; GPs are encouraging this partly to reduce the burden on the NHS and also because many now believe that people should take responsibility for their health.

Some 36 per cent of the health-aware claim their GP is the best single source of advice on diet and nutrition, whereas 34 per cent look for guidance to newspapers, magazines and television/radio.

Healthfood stores come next with a score of 15 per cent, while pharmacies with 4 per cent and supermarkets with 3 per cent are trailing badly.

However for advice on minor ailments, the pharmacist gets the highest score (37 per cent), while some 25 per cent of the health-

aware depend on their own knowledge.

The media continues to exert considerable influence. When in doubt, consumers buy well-known and trusted brands. They are favouring companies which are concerned about safety within their industry.

Women are the greatest consumers of VMS, but usage by both sexes is rising and gaining an older age profile. In the last five years more than 1.5 million men have started using supplements.

By 1995 there are likely to be 700,000 more people aged over 44 than at present. This is significant because sales in the VMS market are highest and growing fastest in the over 34s.

Usage across the social classes is fairly uniform although the C1 group leads with 31 per cent, C2s account for 25 per cent, ABs for 24 per cent and DEs 20 per cent. Heavy users of VMS are single, middle-aged women buying products for themselves.

There are three kinds of supplement users — people who take them regularly (research suggests that some 30 per cent of Britons are regular users); people who use them to combat specific health problems; and users who tend to buy supplements only when they feel rundown.

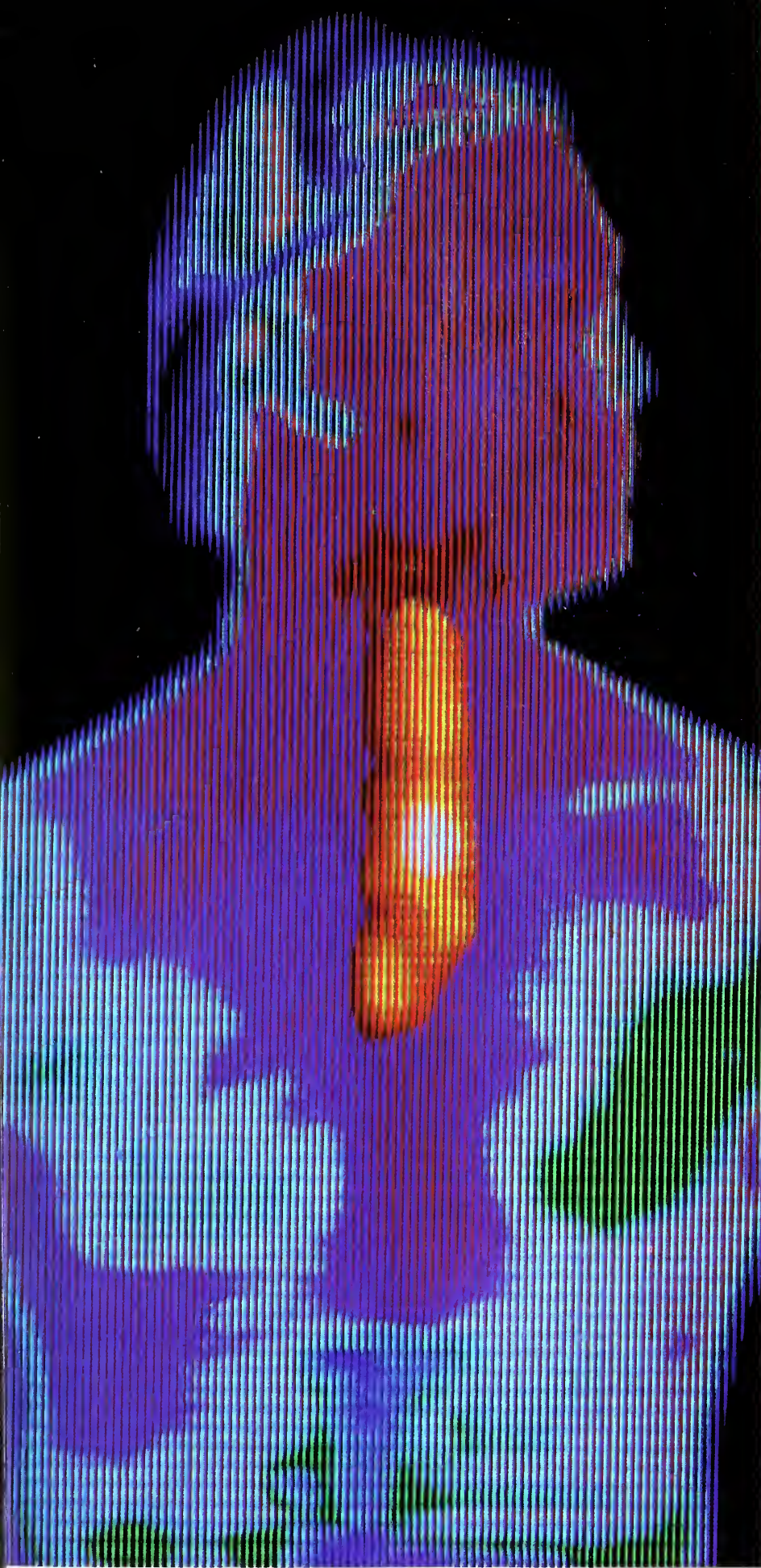
While VMS sales move steadily upwards, the share enjoyed by the various types of retail outlet continues to develop. Pharmacies still have half the total business and healthfood stores about a fifth, but sales in the grocery sector now account for 10 per cent of the market.

The last decade has seen 3-3.5 million new supplement users. There is still potential to attract more as the need for supplements is growing fast, says the report. Seven Seas Health Care Ltd. Tel: 0482 75234.

Easier meal times with Pur

Pur have brought out a range of slip-proof babies' bowls and plates, featuring a non-slip ring to keep them on the table. The rings are detachable for cleaning and each item is lightweight and is made of clear polymer.

The range consists of a ramekin-style bowl for young babies, a larger bowl and a trainer plate. All items cost £3.99, come with airtight lids and can be sterilised, frozen, boiled or microwaved, say Jackel International. Tel: 091-250 1864.



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Pharmacy Prescribing Information

Active Ingredients: *Liquid:* Sodium Alginate BPC 500mg, Sodium Bicarbonate Ph.Eur. 267mg, Colcium carbonate Ph.Eur. 160mg per 10ml dose. *Gaviscon 250 Tablet:* Alginic Acid BPC 250mg, Sodium carbonate Ph.Eur. 85mg, Aluminium Hydroxide Gel BPC 50mg, Magnesium Trisilicate Ph.Eur. 5mg per tablet. **Indications:** *Gaviscon Liquid:* Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux, hiatus hernia and reflux oesophagitis. *Gaviscon 250:* Heartburn

and acid indigestion. **Contra-indications:** None known. **Dosage Instructions:** *Adults and children over 12:*



10-20ml, *children 6-12:* 5-10ml liquid after meals and at bedtime. *Gaviscon 250 Tablets:* *Adults and children over 12:* 2 tablets to be chewed thoroughly as required. *Children under 12:* not recommended.

Note: 10ml liquid contains 6.2mmol sodium. One Gaviscon 250 tablet contains 1.02mmol sodium. Both liquid and tablet forms of Gaviscon are sugar-free. **Product Licence Nos:** 44/0058 Liquid Gaviscon. 44/0103 Gaviscon 250. Further information is available on request from: Reckitt & Colman Products, Dansom Lane, Hull HU8 7DS. *Gaviscon is a registered trade mark.

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Colgate

Pharmacist members of 90 out of 98 family health services authorities in England and Wales met at the Royal Pharmaceutical Society last Monday to discuss their role on the new 11-member authorities. *C&D* reports

Multifaceted role for pharmacist FHSA members

Pharmacist non-executive members of FHSA boards bring independence and detachment by offering a broader perspective than that of the general manager and chairman, Derek Day, deputy director, London Area, National Association of Health Authorities and Trusts told the symposium. "Your professional knowledge enables you to make a contribution to prescribing matters and in particular the interface between primary and secondary care, and value for money. I would also expect you to be at the leading edge of identifying changing health needs within the local community," Mr Day said.

A board of eleven gave individual members a more effective role in decision-making across the total remit of the authority.

But, if you thought the latest NHS reforms were the last, you'd be wrong. Mr Day said the Government has four separate models for how health service management will develop.

Presenting his personal view of the next five years, Mr Day said only the "dynamic status quo" model avoided the need for primary legislation and was the only option for the next year or two. In it, FHSA and DHA would remain separate, funded by and accountable to, the RHA.

This would provide a clear voice for FHSA on the planning and development of the service, high investment from the combined efforts of the two, and make use of FHSA experience in implementing consumer-orientated contracts, with the constructive, almost competitive tension between the two helping both to be run effectively. "Such a model does not rule out experiments," said Mr Day. In Bromley, a single general manager has already been appointed to run both DHA and FHSA — the two are co-terminus. "This will ensure they act as a single health assessment and purchasing authority," Mr Day said.

He believed such an outcome would enable integration and collaboration to be tackled at source, and provide the best way of ensuring a seamless join between primary and secondary care.

Jimmy Fergusson, chairman of Bradford FHSA, saw one immediate role for the pharmacist members of the Authority. "You should invite the other members of the board and senior management staff to spend some time with you in your pharmacies," he said. "It will be a salutary lesson to all of us, it will sharpen up our ideas of how patients' problems are handled across the counter."

Mr Fergusson also delighted his audience with a very pro-pharmacy stance on the future role. "I believe very strongly that there is an enhanced role for community pharmacy," he said. "Many are doing things like blood pressure or cholesterol levels but what about going a bit further?"

Mr Fergusson suggested that the logical extension of doctors prescribing onto computers was to have land lines to pharmacies so the prescription is automatically generated in the pharmacy of the patient's choice. "And there must be a better way of handling repeat prescriptions," he said.

"I'm certain that the range of medicines that could be available over the counter to be sold under the proper guidance of a pharmacist could be extended," he added. "This would result in a considerable saving on the drug budget."

Mr Fergusson also took up Mr Day's point about the special qualities pharmacists bring to the 11-man boards. "The pharmacist member of the FHSA has exactly the same role as every other member and must take corporate responsibility for authority decisions."

The authority's job is to set the agenda — based on guidance from the Department of Health — and to monitor performance against promises made. But members were not managers and should leave the running of the office to the general manager, Mr Fergusson said.

"As pharmacists you will take the lead on pharmacy matters — it would be unusual if you didn't interest yourselves in pharmacy matters," Mr Fergusson said. "Your knowledge should be used to give guidance to the FHSA through standing committees and subgroups on new applications, minor relocations, essential small pharmacies, rural decisions."



Stephen Axon

PSNC secretary Stephen Axon also saw another main role for FHSA pharmacists. "You must put the record straight," he said.

Much of the guidance notes covering applications to dispense created the impression that pharmacists acted to maintain the monopoly of existing contractors over the dispensing of prescriptions.

In the new appeal procedure the removal of pharmaceutical input has been laid down "clearly and unequivocally", Mr Axon said. Both PSNC and the Society had argued that the ban on pharmacists "taking part in decisions" should not mean a ban on all pharmaceutical input to those decisions.

Mr Axon also drew attention to the wording of the Regulations with regard to new applications, and the "necessary or desirable" test. "FHSA have to go further than that," Quoting the relevant section, Mr Axon said that necessary or desirable had to be judged "in order to secure in the neighbourhood the adequate provision of the services".

The burden of proof to show

the existing service was not adequate lay with the applicant. "You have to look at services to patients. It is much better to have a strategic number of pharmacies rather than a large number of unviable units. But if the service is failing or there is not adequate competition that is a time when you are looking at granting an additional application."

Mr Axon said FHSA may be looking at applications as an authority, they devolve the job to a liaison committee; in some the officers were deciding themselves. "I don't see a great problem with that," Mr Axon said. "An officer can look at an area and decide where new services are needed without being befuddled by professional views. But whoever makes the decision, one thing has not changed and that is the consultation process, and the FHSA pharmacist can make sure that consultation gets to all who are likely to be affected by the decision."

A number of key roles for the FHSA pharmacist were identified by a working group of the delegates. Liverpool FHSA member and LPC secretary Jeremy Clitherow, reporting the group's findings, said the pharmacist FHSA member had a credibility problem. "It would be a recipe for disaster if he were seen to be pro-pharmacy," Mr Clitherow said.

However, the group had decided that like the Liverpool example, FHSA pharmacists should endeavour to build the extended role of the pharmacist into their FHSA's three-year plan. "It made sense to us for the pharmacist to tell the FHSA why pharmacists are there and what they can do."

The group saw the FHSA pharmacists role as pro-active. Mr Clitherow said that NAIAT was about to produce a document on the extended role of the pharmacist; this third party evidence could be very useful.

Useful abbreviations

DHA District Health Authority
FHSA Family Health Services Authority
NAIAT National Association of Health Authorities and Trusts
PSNC Pharmaceutical Services Negotiating Committee
RHA Regional Health Authority

Advice on advertising

Pharmacists in Northern Ireland are being told they should not advertise in GP practice leaflets following the March meeting of the Council of the Pharmaceutical Society of Northern Ireland.

The secretary reported that the office had received a number of queries from members and advertising agencies about the ethics of advertising in GP practice leaflets. After a discussion the secretary was instructed to advise the members that the Council recommended that pharmacists should not advertise in GP practice leaflets.

The following applications for registration as students of the Society were approved:

Miss O.J. Canning, 59 Irish Green Street, Limavady, co Londonderry.
Miss Janice Pho Choo Cheah, 12 College Gardens, Belfast
Miss E.M. Crilly, 16 Cloona Crescent, Upper Dunmurry Lane, Belfast
Miss C.H. Davis, 40 Cloverhill Road, Moneymore, co Londonderry
Mr Say Han Foo, Room G06, New Block (Shaftesbury House), Queens Elms, 78 Malone Road, Belfast
Mr B.J. McCarron, Kinawley, co Fermanagh
Miss L. McCreery, 3 Queensfort Park, Carryduff, Belfast
Mr J.D. Mullan, 44 Pinewood Hill, Warrenpoint, co Down

Miss U.M. Mullan, 53 Ranneeglas, Dungiven, co Londonderry
Mr Derek Webb, 10 Sunningdale Park, Bangor, co Down

An application from Mr J.W.A. Shinner for restoration to the Register was granted.

The Department of Health and Social Services advised that a meeting was to be held on April 17 to discuss the proposed establishment of a free standing Post-qualification Education and Training Committee.

The Secretary confirmed that the Department of Health and Social Services had made available to the Pharmacy Health Care scheme the sum of £14,000 so that Northern Ireland could participate. The requisite number of display stands have been ordered and they should be available in May.

The president recorded his appreciation to Mr Hunter and to the office staff for the organisation of his presidential dinner.

The president thanked those who had attended the recent president's at-home. The meeting had been attended by about 60 people who had heard a most interesting talk by Mr Baird. The president particularly thanked Dr Maguire.

Opren latecomers given leave to appeal

Eight alleged victims of Opren were last Friday given leave to appeal against a High Court judge's ruling that they were too late in bringing their damages claims against Eli Lilly.

In January Mr Justice Hidden decided that only one out of nine sample claims, brought on behalf of another 329 men and women, could go forward. The other eight were barred because their actions were launched outside the statutory three-year time limit.

The claimants, who allege negligence and breach of statutory duty, were too late to share in a £2.275 million out-of-court settlement paid by 1,200 people by Eli Lilly in 1987. They asked the judge to use his discretion and allow their cases to proceed,

despite any finding that they were time-barred. But he said it was not appropriate for him to extend the time limit.

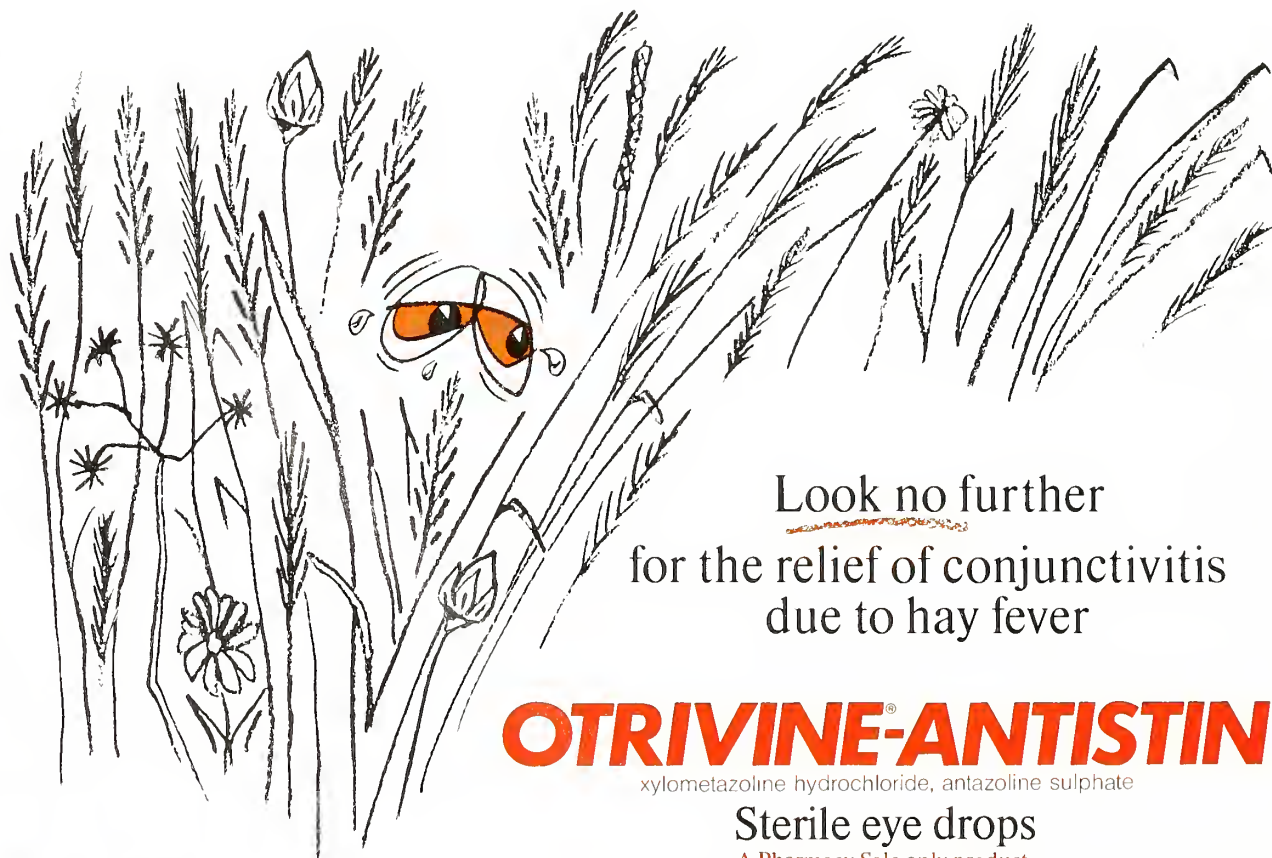
He has given them leave to appeal and ordered their lawyers to produce a schedule of other claimants said to fall within the category of the one who was granted leave to proceed.

The judge's decision in January did not touch on whether there was any ultimate liability on the part of the defendants which include Eli Lilly; its subsidiaries Dista Products Ltd and Lilly Industries Ltd; the Committee on Safety of Medicines and the Licensing Authority.

The claimants allege they suffered long-term and in some cases permanent side-effects.

Health and Agriculture Ministers have decided that the current UK ban on cyclamate should not be lifted, following advice from the Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment. This decision has been passed to the European Commission, with a request that the Commission's

Scientific Committee for Food should review the safety-in-use of cyclamate as a matter of urgency. The sweetener was included in a proposed list of approved sweeteners, as was neohesperidine dihydrochalcone which the Health and Agriculture Ministers have now accepted as being safe for use in food.



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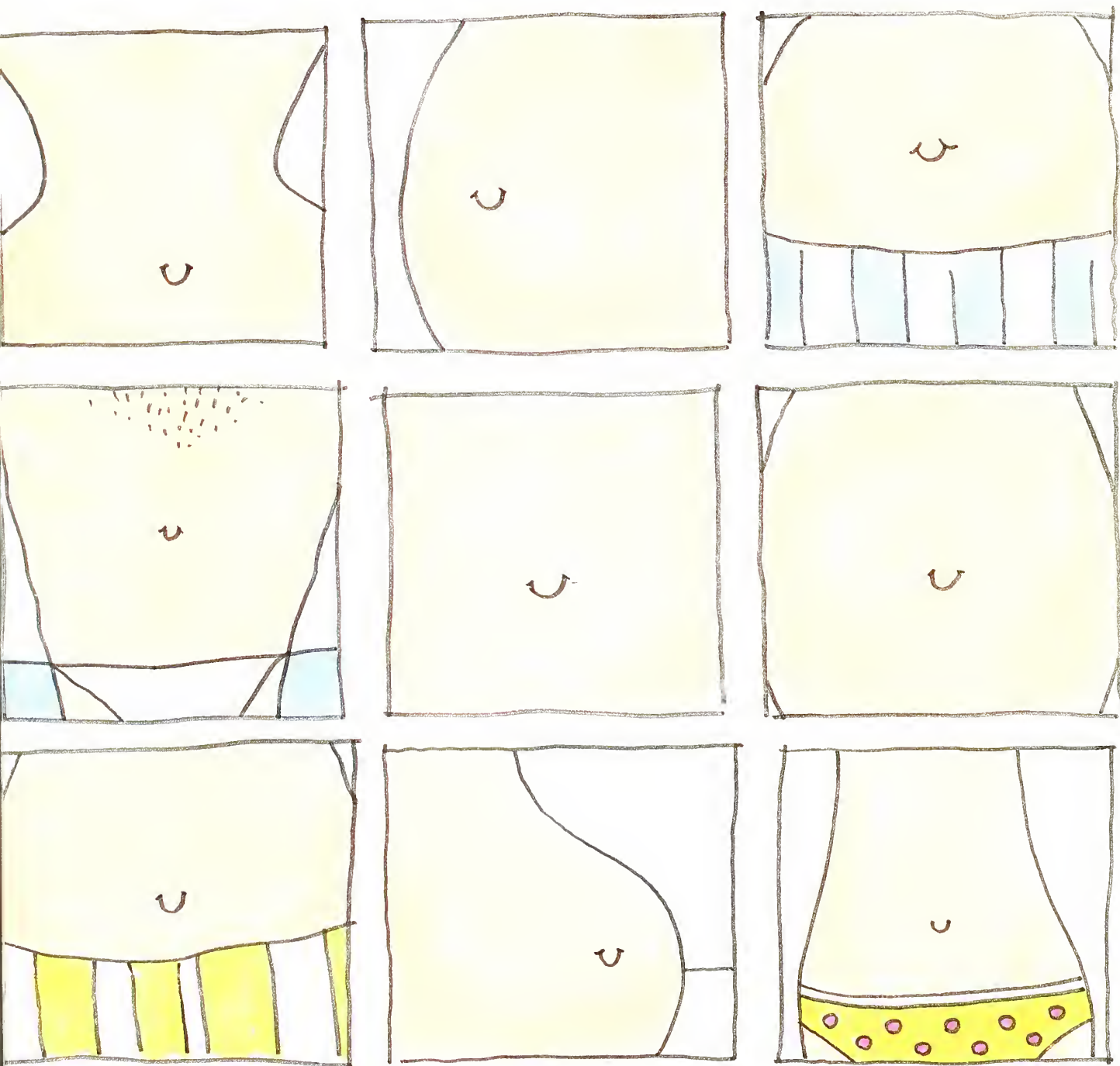
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SOURCE: IMS/BPI/MAT/OCTOBER 1990

In the public eye

Could you convince the public that the community pharmacist is a knowledgeable and approachable healthcare professional? *C&D* interviews the woman at the National Pharmaceutical Association with this challenging task



Colette McCreedy will tell you the image most members of the public have of a community pharmacist is both good and improving — but it needs to be worked at.

Take, for example, the recent spate of

publicity given to the “bad” advice pharmacists in a Newcastle study provided on treating diarrhoea in infants. Although many pharmacists probably felt their professional bodies should rush to their defence, the National Pharmaceutical Association decided a low key approach would be best to avoid

giving the story more prominence than it deserved.

It is understandable, then, that Mrs McCreedy lists tact, diplomacy and patience among the qualities she needs in her job as head of public affairs at the NPA. For part of her job is to preserve and promote community pharmacists’ image to the public.

A sense of humour is also high on Mrs McCreedy’s list of qualities. Indeed, it was one of the pre-requisites called for in the advertisement for her first job at the NPA, which she started on April 1, 1986. Mrs McCreedy confesses to being quite worried that she would turn up only to be told: “April Fool! You haven’t got the job”. Five years later, she is still there.

She joined as the acting head of the information department, and worked there for six months covering a colleague on maternity leave. There then followed a spell as technical officer before her appointment as head of the newly created public affairs department some two years ago.

It takes teamwork

Before this the NPA’s public relations was handled by Tanya Turnton, the press and public relations officer, with the assistance of Sally Patterson. Today Mrs McCreedy heads a team of four. “I’m not a PR expert, at heart I’m a pharmacist, but I surround myself with people who have the skills I lack,” she says.

Her team consists of Anne Northey, who organises NPA local branch activities and conferences, and three press officers, all graduates with writing experience and other individual skills that make each a valuable asset.

Alison Heard has had extensive experience in PR in both commercial and charity organisations, and works primarily on the production of *The Pink Supplement*. Sally Patterson is the artistic one, and her principal tasks are to provide display material and write the monthly press releases which cover a wide variety of pro-pharmacy topics, and are sent to local newspapers and radio stations; and Judy Vatisas, an experienced market researcher, is responsible for the “Ask your pharmacist” questions and answers which are sent to over 400 local newspapers.

The department has recently extended their service to the women’s press, which they see as an important medium for communicating health issues. Mrs McCreedy contacted a number of health editors, which has so far resulted in articles appearing in both *Good Housekeeping* and *Parents* magazines.

Rather modestly Mrs McCreedy says: “I’m simply the co-ordinator.” She comes up with the facts and relies on her press officers to put them across in an interesting way. But she confesses: “I think it’s vital there is a pharmacist within the department who has had community pharmacy experience. You need that to be able to relate to members, and communicate with the public.”

Talking shop

Aside from organising the NPA's written communications Mrs McCreedy spends some of her time talking to members at branch meetings, regional dinners, and conferences. She also speaks to potential members such as students at the schools of pharmacy.

She admits to being more at home speaking than writing and classes talking to students as one of her favourite activities. "I'm very much a fan of the NPA; I'm committed to it and to community pharmacy. I am therefore enthusiastic when talking about it, and enjoy it very much." Luckily, Mrs McCreedy does not suffer from stage fright.

Another slightly different aspect of Mrs McCreedy's job involves overseeing European pharmacy issues. As secretary of the UK delegation to the EC Pharmacy Group she travels extensively throughout Europe. She is half French and speaks the language fluently, making her ideal for the job.

There are about six meetings a year in Brussels which each last several days and she gets invited to speak to pharmacists in other European countries. Last year she accepted two invitations. "If I accepted all of them, I would never be in the office or get any work done!"

"I never know what's going to happen from one day to the next. If there is something that affects pharmacists in the news, I could spend the whole day talking to the media. I do have to think on my feet, but often consult with Mr Astill or the information department," Mrs McCreedy explains. She adds that she is not the first port of call for radio interviews — that joy falls to NPA director Tim Astill. But he often relies on the department to brief him and

prepare as much information as possible around the subject.

On one occasion Mrs McCreedy had to speak to LBC radio live on their air at 7pm. She also had to pick up her baby from the child-minder at the usual time, so she arranged to do the interview at home, taking her daughter next door to the neighbours moments before going on air.

This is just one of the delights of being a working mum! She recalls an incident in London when she was trying to make a point rather forcefully at an important meeting. She went into her handbag for something and instead pulled out...a disposable nappy. "I totally lost all credibility!" she exclaims. The answer, she has found, is to keep her work and leisure handbags separate.

Before the NPA

All this is a long way from working as a pharmacist. Mrs McCreedy studied pharmacy at Chelsea (1975-78) and then did her prereg at Moss Chemists. She remained with them after she qualified, but after a while, she began to feel that there was nothing more to achieve. Her career had become increasingly dependent on positions falling vacant in middle/senior management. As Mrs McCreedy had always wanted to perfect her French, she decided to go and work in France for a while.

Unfortunately there was nothing available at the time, so she decided to try Switzerland. She got a job in Chamney, near Gruyere, in a pharmacy looking for a short term locum. She got a work permit, approval from the Society, and spent nearly two years there.

Mrs McCreedy has fond memories of her

time in Switzerland, not least of being able to ski during her lunch break! But more importantly the job was partially responsible for her position today. So impressed was she by the high standards of pharmacy practice and the esteem that the public has for pharmacists in Switzerland that she decided that she wanted to work towards achieving that same level of respect for the profession in the UK.

First in the family

Mrs McCreedy was the first in her family to go to university, which she entered from a "very ordinary comprehensive school". Encouraged by her teachers, she did science subjects and decided on pharmacy because her neighbour was John Gorrod, who was doing research at Chelsea (he subsequently became head of pharmacy at King's College).

Mrs McCreedy recalls not wanting to be too far away from her Middlesex home which is one reason she chose Chelsea. Leaving home to go to university was a traumatic enough experience for the family. She has come a long way since then, and if her past record is anything to go by, she may well go a considerable way towards achieving her goal of elevating the image of the pharmacist in the public eye.

But she cannot do it on her own. Each pharmacist should be his own PR officer, says Mrs McCreedy. "I go into a lot of pharmacies and don't introduce myself, just to get a feel of how the public is treated, so that I can identify with them. I don't always like what I see."

"But I am always very heartened when I get excellent service from the pharmacist and staff. If all pharmacists did that I wouldn't be in a job!"

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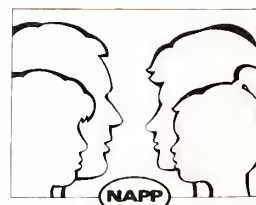
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PHARMACY update

Steroid insensitivity

A further problem with steroid treatment of asthma could be a lack of sensitivity to corticosteroids. The cutaneous vasoconstrictor effects of the topical steroid beclomethasone valerate were measured in 60 asthmatics responsive and unresponsive to inhaled steroids.

There was no difference between the responses of patients with mild asthma, those undergoing chronic treatment with oral steroids, or those with steroid-sensitive asthma. However, the skin response to topical steroid was significantly diminished in patients with steroid-resistant asthma.

Airways obstruction was significantly worse in steroid-resistant than steroid-sensitive patients but their impaired skin response could not be explained by greater use of bronchodilator drugs. Instead, it is proposed that these patients are inherently resistant to the effects of steroids. *Lancet* 1991;337:576-80

Bone and inhaled corticosteroids

Recent evidence from the UK showed that high-dose inhaled corticosteroid therapy results in systemic absorption sufficient to produce thinning of the skin in children. Now, the same team has investigated the impact of inhaled steroids on bone metabolism in adults.

A total of 12 healthy volunteers inhaled either beclomethasone dipropionate 2,000mcg/day or budesonide 1,800mcg/day for four weeks. Bone metabolism was assessed by measuring urinary excretion of hydroxyproline, calcium and creatinine (markers of bone resorption), and plasma levels of alkaline phosphatase and parathyroid hormone (markers of bone mineralisation).

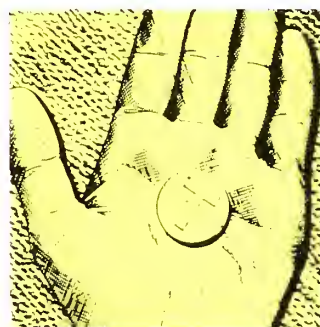
Budesonide had no effect on bone turnover, a significant contrast with beclomethasone: after 28 days, beclomethasone increased the hydroxyproline:



creatinine ratio by 46 per cent and reduced serum alkaline phosphatase activity by 7 per cent.

High dose inhaled beclomethasone therefore reduces bone mineralisation and increases resorption on a scale equivalent to half the effects produced by oral prednisone at a dose of 20mg/day — and which could contribute to osteoporosis. Budesonide may have produced no effect because it is more rapidly metabolised and excreted than beclomethasone.

None of the changes observed in this study were outside the normal ranges of the parameters measured. Nonetheless, the possible effects of chronic high-dose treatment in people with asthma should now be investigated. *Thorax* 1991;46:160-4



Dose of haloperidol

There is a trend towards using high doses of neuroleptics to treat schizophrenia but little evidence to support it. The recommended dose range of haloperidol is initially 1.5-20mg/day, increasing to 100 mg/day or, exceptionally, 200mg/day, but research from New York has now challenged the value of such high doses.

Patients admitted to a psychiatric hospital with acute schizophrenia were randomised to receive 10, 30 or 80mg/day of haloperidol, combined with the anticholinergic agent benztropine as prophylaxis against extrapyramidal effects; adjunctive lorazepam was allowed to treat episodes of agitation. Symptoms were then assessed at weekly intervals for six weeks.

Of the 87 patients recruited, 23 dropped out because they withdrew their consent, their symptoms deteriorated or for protocol violations. Of the rest, 42 entered remission but symptoms were unchanged in 22. Withdrawals, remission and treatment failures were evenly divided between the three doses. Surprisingly, there were no differences between the groups in either the extent of symptomatic improvement or the frequency of adverse reactions.

Although adverse reactions were expected to have been less frequent at the higher doses of haloperidol, prophylaxis with benztropine probably obscured any differences. This study provides no evidence to support the use of haloperidol in doses greater than 10mg/day. *Archives of General Psychiatry* 1991;48:166-70

Dose frequency of omeprazole

Weekend therapy for duodenal ulcer could become possible if the results of a Scandinavian study are substantiated.

After healing of duodenal ulcer, 195 patients were assigned to six months' maintenance treatment with omeprazole 10mg/day, 20mg three times weekly or placebo. After three months, relapse rates were 16, 21 and 50 per cent respectively; at six months, they increased to 23, 27 and 67 per cent. There was no significant difference in efficacy between the two regimes of omeprazole and both were significantly superior to placebo.

The total weekly dose of omeprazole using the intermittent regime was 60mg compared with 70mg with the daily dose schedule, which did not impair efficacy or confer greater safety. However, the convenience of a three times weekly dose is preferable, especially if clustered around the weekend.

In the UK, omeprazole is licensed for the treatment of resistant ulcer but, if its safety during chronic use is confirmed, intermittent therapy for ulcers could reduce costs and improve compliance. *Gastroenterology* 1991;100:663-9

Hydrocortisone allergy

Paradoxically, isolated cases of allergy to corticosteroids have been reported. Some 5 per cent of patients with allergic contact dermatitis may have steroid allergy.

A total of 500 patients with allergic dermatitis were patch tested with trioxocortol pivalate, a steroid which has been associated with cases of allergy in Europe; 24 were allergic. These patients were then patch tested with hydrocortisone acetate; only two reacted. However, when it was

injected intradermally, all 24 patients reacted positively, showing that the poor dermal penetration of hydrocortisone masked the true incidence of allergy. Seven other cases of allergy — to clobetasol propionate and betamethasone valerate — were also confirmed.

Allergy to hydrocortisone may underlie some cases of treatment failure and should be considered in any patients who do not respond to treatment with steroids. *Lancet* 1991;337:761-2

Bone infusion

In an emergency, it is often difficult to gain vascular access in a child. As an alternative, direct infusion into a bone has been recommended — although it comprises only a small fraction of body weight, marrow gets 11 per cent of cardiac output.

Clinical experience is limited, so it is uncertain whether drug pharmacodynamics are altered by this route of administration. It is impossible to test this in children, so the cardiovascular effects of dopamine and dobutamine have been compared after intra-osseous and intravenous infusions in pigs. There were no significant differences between the routes of administration with either drug.

Clinical experience suggests that intra-osseous infusion may cause osteomyelitis in up to 10 per cent of cases if administration is prolonged but, the authors conclude, it offers an acceptable alternative in emergencies.

American Journal of Diseases of Childhood 1991; 145:165-7

A plus in HRT

Progestogens are used in hormone replacement therapy (HRT) largely to avoid endometrial hyperplasia and cancer. Now, it appears, that they also act with oestrogens to preserve bone mass.

A total of 80 postmenopausal women were randomised to receive medroxyprogesterone 20mg/day, conjugated oestrogens 0.6mg/day, both hormones together at half-dose or placebo. Bone density and mass were measured in the spine, radius, wrist and total skeleton.

After two years, bone mass had declined significantly in the placebo group. Bone mass declined with medroxyprogesterone, but to a lesser extent; in particular, the spine was not preserved.

By contrast, both spine and total skeleton density increased after oestrogens alone. However, the combination of low doses of both hormones was almost as effective as oestrogens alone, preserving, though not increasing, bone mass. And it had a more favourable influence on blood lipid concentrations.

The minimally effective dose of oestrogens is 0.6mg/day. In combination with a progestogen, this can be halved without a great loss of effect. This could have implications for women at risk from the adverse effects of oestrogens due to cardiovascular disease.

American Journal of Medicine 1991;90:171-7

Levodopa and selegiline for Parkinson's disease

In 1989, selegiline was found to delay the onset of motor impairment in previously untreated Parkinson's patients, leading to recommendations that selegiline should be prescribed for all in the hope that progression of the disease might be slowed. Evidence from New York has now cast doubt on the wisdom of using selegiline alone in many patients.

A total of 38 patients with newly-diagnosed Parkinson's disease were treated with selegiline monotherapy; after more than two years and despite worsening motor impairment, five chose not to receive adjunctive levodopa therapy. Of the remainder, 26 were treated with combination therapy after an average of 14 months with selegiline alone.

Of these, 24 (92 per cent)

experienced a marked improvement in symptoms, far in excess of that achieved with selegiline alone, after the addition of low doses of levodopa (375mg/day). Five patients developed fluctuations in motor control after one to three years of combination therapy but no patient had developed major disability, despite having had the disease for six years.

This suggests that selegiline may well delay the progression of the disease but patients suffer possibly unnecessary impairment compared with the benefits available through treatment with levodopa. The authors conclude that early treatment should begin with a combination of selegiline and levodopa for maximum benefit.

Archives of Neurology 1991;48:31-4

Psychology and NSAIDs

The adverse gastro-intestinal effects of non-steroidal anti-inflammatory drugs are common but difficult to predict: though many risk factors are known, it is still unclear why some people develop dyspepsia or ulcers and others do not. Now, Canadian rheumatologists have identified a further potential risk factor — psychological trait.

A total of 83 patients attending a rheumatology clinic completed the Middlesex Hospital questionnaire to assess anxiety and depression, and a questionnaire about the frequency and severity of gastro-intestinal symptoms which they attributed to NSAIDs. Of these, 37 patients reported dyspepsia; this group contained more women than the group without dyspepsia but they were alike in other risk factors including age, NSAID use and

duration of treatment.

Free floating anxiety (anxiety without an apparent cause), somatisation (expression of a psychological event as a physical symptom) and depressive symptoms were significantly more common among patients reporting dyspepsia whereas the psychological attributes of the non-dyspeptic group were normal.

Psychological traits could therefore influence the emergence of adverse gastro-intestinal reactions to NSAIDs, though it is unclear whether the physical symptoms are a cause or effect of the psychological trait. However, it shows that people who experience adverse reactions would benefit from psychological support.

Annals of the Rheumatic Diseases 1991;50:211-3

Five years of gold but no benefits

Gold injection is the standard disease-remitting agent by which other second-line drugs for rheumatoid arthritis (RA) are judged. Yet there is no consistent evidence that it improves the outcome or favourably affects progression of the disease despite the risk of potentially severe adverse effects.

In the latest clinical trial, patients with RA were monitored for five years. Of these, 216 were treated with gold for at least three months and 37 per cent received gold every year. The outcome,

judged by the number of painful joints and functional ability, was compared with that of 284 patients treated with other agents, including penicillamine, hydroxychloroquine, methotrexate and azathioprine.

After adjustment for known prognostic factors, there were no significant differences between the groups in symptomatic improvement, irrespective of the duration of the disease or the duration of gold treatment. In fact, no treatment altered the severity of symptoms during this period.

NSAIDs and colon cancer

A case-control study from the United States has suggested that NSAIDs may exert at least one favourable effect on the large bowel.

Prostaglandins play a role in cell proliferation, neoplasia and the immune response and NSAIDs, which inhibit prostaglandin synthesis, inhibit tumour growth in the colon of rodents experimentally fed carcinogens. Since cancer in the rodent colon is a good model for human bowel cancer, it is possible that NSAIDs could protect against colon cancer in man.

To test this hypothesis, NSAID use by 1,300 patients with colon cancer was compared with that of two groups of controls — patients with other cancers and hospital patients with trauma or infection. Regular use was defined as administration of NSAIDs, including salicylates, for at least four days a week for at least three months. Possible risk factors for colon cancer, including coffee, age, sex and family history, were controlled for.

NSAID use — virtually all of which was due to salicylates — was significantly more common among controls, whether they had non-colon cancer, or trauma or infection. Compared with non-users, regular NSAID use was associated with a reduction in the risk of colon or rectal cancer of 50 per cent. However, when regular use had been discontinued for more than a year, the risk of colon cancer was unchanged, irrespective of the duration of previous NSAID use.

Although bias cannot be excluded, this study suggests that regular, current use of salicylates might protect against cancer of the large bowel — though the question how is still unanswered. *Journal of the National Cancer Institute* 1991;83:355-8

Although this evidence does not preclude the possibility that a subset of patients might benefit from parenteral gold therapy it does not show any benefit overall. Moreover, the five year mortality of this group remained twice as high as in the population at large. *Annals of Internal Medicine* 1991; 114:437-44

Research Digest is a regular series written by drug information specialist Steve Chaplin MRPharmS, looking at current developments in medicine.

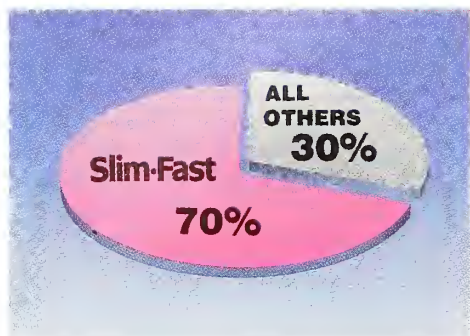
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the value of the slimming market in
less than a year.

*(A.C. Nielsen HBa Pharmacy Index ND 1990)

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It's the newest way to remove **Immac** hair, and it's bound to make your sales grow and grow.



Plans for survey on community group with possible £10 fee charged each year

The Royal Pharmaceutical Society's Council has agreed that the office should submit proposals for a survey of community pharmacists to determine whether they wanted a community pharmacy group. This might mean a membership fee of £10 charged on top of the annual retention fee.

Proposals for an appropriate survey will be put to the next Council meeting in May.

The need for a possible additional charge arose because of the problem of financing a potentially very large group from other income sources. The Council accepted a feasibility report which concluded that it would be feasible to establish a membership group with a fee of £10. The policy of charging fees would not be extended to the other membership groups.

The feasibility study had been based on a membership group with the following objectives: the advancement of the profession of pharmacy in community practice; the advancement of education in promoting the application of pharmaceutical knowledge in community practice; the provision of advice to Council through the Practice Committee on all aspects of community pharmacy practice; the communication of appropriate information and advice to group members; and an annual programme of professional and educational meetings.

The group would have a group committee comprising four elected members from the group, four Council members and four co-opted members nominated by the Society's officers. The study was based on nine meetings a year of the group committee. Group meetings would be self-financing and a regular group newsletter would be produced. The study included income and expenditure estimates based on a membership of 5,000, from a total potential membership of about 18,000.

Although Council accepted that a group was feasible, there was much debate over whether it was needed and treasurer David Sharpe suggested that an unbiased questionnaire would give some idea of the demand.

Moves on OPD Further requests for a meeting on original pack dispensing are to be made to the Health Minister. Council agreed that the Society should pursue the objective of making the prescribing and dispensing of

medicines in original packs mandatory except in exceptional circumstances. Council also agreed that the Society should continue to advocate a system of packs for treatment of acute conditions comprising a maximum of seven days' supply, supplemented by a 28-unit pack.

The Association of the British Pharmaceutical Industry will be asked to recommend to member companies that packs should be assembled into small standard outers, that pack dimensions should be based on modular unit sizes, and that packs should be of a size and design which allowed dispensing labels to be attached without difficulty and without obscuring important information. Representations would be made to manufacturers where specific problems were identified with existing packs.

EC developments A proposal which would have required record keeping by community pharmacists of all medicines dispensed has now been removed from the draft Directive on wholesaling of medicinal products. The secretary and registrar reported that one of the remaining concerns was wholesaling by community pharmacists, which included even modest supplies to another pharmacy or a doctor, where the Directive contained no provision for exemption from the need to obtain a wholesaler dealer's licence. The UK delegation to the European Community Pharmacy Group would be seeking to maintain the present UK position.

Another concern was the need for wholesalers to have pharmaceutical advice. All the draft Directive said was "advice from appropriately qualified persons", and it was left to member states to decide whom. The indications were that the UK Government was not persuaded that there was a need to require wholesalers to have advice from pharmacists.

Turning to the draft Directive on the legal status of medicines, the secretary and registrar said that most EC countries had a prescription only medicine list, with other medicines available through pharmacies. The European Parliament's rapporteur for the three draft Directives had said that she would like to see a positive list of medicines that could be sold only through pharmacies, with other

medicines available from other outlets where a member state wished to pursue that policy. However, there was concern in other member states that once there was a list which did not include all the medicines on the market, there would be pressure on governments to break the pharmacy monopoly.

Rurality appeals The Society has been unsuccessful in an attempt to ensure that there is balanced pharmaceutical and medical representation on NHS appeal committees considering appeals on rurality in applications to dispense in rural areas.

A letter from the NHS management executive stated that guidelines for the appeals unit which was being set up by Yorkshire Regional Health Authority were already being printed when the Society's request was received so it had not been possible to incorporate the points made. However, the appeal unit was free to operate in its own chosen way within the parameters set by the regulations and guidelines. So there was nothing to prevent it adopting the measures advocated by the Society.

Prison pharmacy Council agreed that a letter be sent to the director of the prison medical service requesting that the Society be permitted to present an oral submission to a working party looking at the service. A detailed examination of the prison pharmaceutical service was to take place at a meeting of the working party this month, when its head pharmacist Mr C.L. Spencer would submit evidence supporting the written submission already made by the Society and the report prepared by Mr Colin Hitchings (a former member of the Society's Council).

Free Bulletin? Council agreed that representations should be made to the Department of Health to obtain free copies of *Drug and Therapeutics Bulletin* for community pharmacists and pharmacist advisers to family health services authorities.

Substance misuse Council agreed that copies of a document on "The pharmacist's contribution to the management of substance misuse" should be sent to district pharmaceutical officers and chief administrative pharmaceutical officers. The document had been produced as a result of a meeting between representatives of the



Society and the Royal College of Psychiatrists and was to be published in the college's *Psychiatric Bulletin*. It suggested that each regional and local advisory committee on substance misuse could benefit from having a community pharmacist member as well as pharmacists employed by health authorities.

Guidance on computer scripts Council agreed that guidance should be given to pharmacists on the problem that prescriptions with computer-generated facsimile signatures were not valid. The guidance would also be notified to the Prescription Pricing Authority, the British Medical Association and the General Medical Services Committee. Appropriate letters would be sent to the Dispensing Doctors Association, the *British Medical Journal*, the *Lancet* and computer software suppliers.

Branch review Council agreed that all branch secretaries should be sent copies of a document reviewing branch activities and containing information which could assist in planning future activities. The review, which had examined the branch structure, activities and finance, had been carried out at the request of the 1989 branch representatives' meeting. Council agreed that there should be no changes in branch structure and administration as a result of the review.

Needle exchange Council accepted a recommendation of the Ethics Committee that no objection should be made to the inclusion of users of anabolic steroids in schemes for the supply or exchange of hypodermic needles and syringes.

Nomad approved Council agreed that the new design Nomad monitored dosage system allowed supplies of medicines to be labelled to comply with the labelling regulations made under the Medicines Act 1968. The Ethics Committee's reservations about earlier versions of the Nomad cassette system had centred on the presentation of more than one medicinal product in each compartment of the cassette. This point seemed to have been addressed in the new version and other security features had been introduced. The revised labelling appeared to be well within the spirit of the labelling regulations.



Kyomi Deo-perspirant — the natural alternative to the anti-perspirant

Today's health, body and environment conscious woman is demanding choice. Most particularly a more natural, but effective choice. When it comes to caring for her body, you can now meet her demands with a new product set to revolutionise the underarm protection market — Kyomi Deo-perspirant from Elida Gibbs

Until now, people have only been able to control underarm wetness by using products which work by causing a chemical reaction in the sweat glands. This creates plugs which seal the body's pores and stop perspiration.

Kyomi Deo-perspirant works in a completely different way. It doesn't block pores but works by absorbing sweat on the surface of the skin and then letting it evaporate naturally.

It will be the option for those who want a product which works naturally and will be the answer, too, for those people who reject anti-perspirants.

Kyomi not only offers pharmacies a new and attractive product, but a whole new category that is bound to appeal to the customer of the '90s.



Meeting new demands

No one can have failed to notice the growing trend towards more natural, body-friendly products. When it comes to toiletries, consumers are becoming increasingly aware of the benefits of opening their pores, and are taking a more natural approach to body care. Some may well have avoided using anti-perspirants altogether for this reason.

Kyomi is the only deodorant product on the market which contains a naturally-derived active ingredient to control wetness. Put it on shelf along with Elida Gibbs' already established brands and you'll be able to meet every demand your customer makes.

Investment and support

As the largest supplier of deodorant products in Britain, Elida Gibbs will be making every effort to let its customers know about the new arrival. The launch will see £2.5 million spent on advertising on television and in the national Press.

Kyomi will also be supported by the following in 1991:—

- ☐ Money-off couponing to over one million households.
- ☐ An extensive public relations campaign.
- ☐ Special display shelves for on-shelf impact.
- ☐ A trial size 75ml aerosol product at 49p available for the launch.

☐ Consumer information leaflets at point of sale.

While the TV campaign will trigger trial, advertisements in the national Press and women's magazines will explain how Kyomi is different to conventional anti-perspirant deodorants, and will feature the line: "Kyomi — works with your body, not against it".

A naturally good return

Retailing at a premium to the market, Kyomi will be bringing in excellent profits, fast. You'll be able to offer three choices of applicator: aerosol (150ml, suggested retail £1.59), solid stick (50g, s.r. £1.69) and roll-on (45ml, s.r. £1.19). The aerosol and roll-on come in three fragrances — Aqua, Coral and Blush. The solid stick in Aqua and Coral only.

But Kyomi offers more than increased profits. It offers you the chance to take advantage of a new and growing sector namely deo-perspirants.

The anti-perspirant/deodorant market is currently worth £216 million at retail, but is growing at a rate of about 6 per cent each year. However, more than five in every 20 men, and three in every 20 women don't buy an anti-perspirant/deodorant at all. Kyomi could draw many of these customers in, customers who have perhaps steered clear of harsher bodycare products, who

have disliked the idea of a product which stops natural perspiration and, of course, those who are simply looking for a more naturally acting form of body care.

How different is it?

Anti-perspirants were first developed in the fifties and since then the basic formula has changed very little. They get to work when their chemicals enter the sweat duct, reacting with their surroundings and causing a gelation, so blocking the pore and stopping perspiration.

Kyomi Deo-perspirant has been developed by Elida Gibbs over the last three years in the hope of finding a completely new and naturally acting way to control underarm perspiration and odour. The result is different to anything else on the market.

Kyomi's formulation contains a plant-derived fibre as its active ingredient which can absorb up to 50 times its own weight in water. It works on the skin by absorbing perspiration and holding it there until it evaporates, leaving the body smelling beautifully fresh. No blocking of pores or interfering with the normal structure of the sweat gland.

Kyomi Deo-perspirant works with your body not against it. What could be more natural?

For further information contact Elida Gibbs on 071-409 6236.



The APD market is fragrant with success. CFCs have failed to raise a stink, and aerosols are nosing ahead in the popularity stakes

Sweet smell of success



AGB data for the antiperspirant deodorant (APD) market to year ending 1990 makes pretty good reading!

The total market value is £131.1 million, up 6 per cent on the previous year. Aerosols account for 71 per cent (up from 69 per cent), roll-ons 21 per cent (down from 22 per cent) and sticks/solids/creams 8 per cent (down from 9 per cent).

A look at market volume shows only a slightly different picture. The overall volume has fallen slightly (down to 115.5 million units from 120.7 — a 4 per cent drop); aerosols are up 1 per cent to 62 per cent, roll-ons are unchanged at 32 per cent, and sticks etc have dropped 1 per cent to 6 per cent.

Why has the market volume declined? Elida Gibbs say: "After the CFC scare in 1988 consumers, particularly women, moved away from aerosols to roll-ons and solids. Aerosols have faster use up rates than these, and therefore volume has declined."

But consumers are turning back to aerosols because they want easier product application and now assume aerosols are CFC-free, say Elida Gibbs. And, indeed, the British Aerosols Manufacturers Association confirms that "virtually all" are.

Elida Gibbs say that if the trend back to aerosols continues, the market volume will stabilise or even grow. Some 78.6 per cent of men and 88.2 per cent of women use aerosols — more than before the scare.

Sure is the brand leader in all three sectors of the market, and has a total share of some 16.8 per cent. Other top brands include Mum, Amplex, Natrel Plus, Right Guard, Imperial Leather, Soft & Gentle, and Body Mist.

Bristol-Myers say that the market location is as follows: total grocers 40.6 per cent (up 8 per cent); total drugstores 20 per cent (up 10 per cent); and total chemists 28.4 per cent (down 2 per cent). The good news is that the independent chemist sector's 5.7 per cent share is growing at 10 per cent year on year.

What she wants

Young women want personal hygiene products that are "bright and fun", "break some of the rules" and "look distinctive and different", say Smithkline Beecham, who repackaged Body Mist last year in bright and colourful packs.

Colgate-Palmolive relaunched Soft & Gentle last year in more feminine packaging, which they say has helped the brand to improve its market share. Sector development manager Michael Bealing says: "The role of packaging in the deodorant market is one of particular significance. The personality of a brand and its 'lifestyle image' is captured and conveyed by the design. While consumer needs have remained the same — protection and efficacy — the formulation and packaging of products have changed to suit the consumer's attitudes and lifestyles."

When it comes to bodysprays, the fragrance is important too. Although they contain deodorants as well as fragrances, they are often used in conjunction with an underarm deodorant, say Elida Gibbs. Bodysprays are often an introduction into the fragrance market for teenagers.

The market is worth £39m at rsp, according to Elida Gibbs estimates. Impulse

General Deodorants — Sector Development
Sterling

Total Market Value (£M)	59.5	61.7	63.8	69.3
Yr/Yr % Change			+1	+9
Aerosols	68	70	69	72
Roll-Ons	23	21	23	20
Sticks/Solids/Creams	9	9	8	8
6 M/E	Jun '89	Dec '89	Jun '90	Dec '90

Source: AGB

has a 58 per cent share (value) of the market (50 per cent share volume). Limara has a 4.7 per cent share, Sixth Sense 2.6 per cent, Coty 2.4 per cent, own label 13 per cent, and there is a myriad of smaller brands that are usually variants in fragrance ranges (Elida Gibbs value estimates). The market is split more or less into thirds between multiple chemists, multiple grocers, and independent retailers.

Elida Gibbs' newest variant Vive was launched last month (C&D, March 30 p496); their strategy is to introduce a new variant each year to keep in line with fashion trends.

Over the next two months, a £3m television and cinema advertising campaign is planned, and Press advertisements will be placed in teenage and women's magazines, carrying five million vouchers for a free Vive trial size. These will be on shelf from the end of May.



SB added a new variant — Dreamy Feelings — to their Sixth Sense range last month (C&D, March 2, p325), taking the number of variants to five.

Coty have repackaged their Wild Musk variant this month, in "more stylish, sophisticated packaging" that complements the style of the other four in the range.

Max Factor's brands include Le Jardin d'Amour and Le Jardin bodysprays, and their Liaisons bodyspray range — Intuition, Charade and Desire. They have also just added a bodyspray to their Charlie range.

The day of the
deo-perspirant

A new type of product — a deo-perspirant — has been launched, and looks set to expand the APD market even further

Until recently, if you wanted a product that controlled underarm odour and wetness, you would have to go for an antiperspirant deodorant. But now there is another option — the deo-perspirant — namely Kyomi, which was launched by Elida Gibbs last month (C&D, March 16, p402).



Essentially, it does the job of an APD, but in a different way. Kyomi is described as "body friendly" because, unlike APDs, it does not inhibit perspiration. Instead it absorbs and removes it on the surface of the skin, and then releases it through evaporation. This is water absorber technology. "The material which absorbs the perspiration is plant-derived and part of a patented water absorber system which can take up to 30 times its own weight in water," explains Elida Gibbs' technical brand manager Debbie Forster. The "material" is modified, finely powdered cotton.

Kyomi also contains a deodorant and deo-effective fragrances. It provides instant and consistent effects on sweating; it provides instant control by returning to normal perceived perspiration when use of the product stops; and it regenerates itself during rest periods of the perspiration cycle.

So why would anyone carry on using an APD when they could use a deo-perspirant? Elida Gibbs say there is a place in the market for both types of products: Kyomi sits comfortably next to Sure without cannibalising it. Sure is perceived as a high performance brand; body friendly products sit at the opposite end of the spectrum. The APD a person chooses relates to their level of self-anxiety.

Kyomi will attract new users and grow the market, believes Elida Gibbs.

He's no sissy!

Think twice before calling a man who cares about his hair, skin and personal freshness a 'sissy'. These days a man is more likely to be picked on if he looks unkempt and reeks of body odour



Men's toiletries is big business! Nicholas say the market has grown steadily from £186m in 1985 to some £360m in 1990. In the same period, male deodorants have reached £45m from £31m. Around 70 per cent of men now use an APD, say Gillette.

What many men in the UK want most from APDs is no nonsense protection and quality fragrances that do not over-power, say SB. APDs used by men tend to fall into two categories: the first comprises small volume "for men" line extension to parent brands that were originally aimed at women, and the second APDs that are just one item within a wider male personal care range.



SB say their Body Check range, re-launched last April, exploited the gap for a stand-alone range free from association with brands targeted at women, and independent of male fragrances. It comprises two variants in aerosol format. SB say that 68 per cent of male users use aerosols compared with only 52 per cent of women.

Another SB brand Brylcreem Black now flaunts a stylish and contemporary new livery (C&D, March 2, p325). The range contains a bodyspray and an anti-perspirant. A £1.8m Press and television campaign and £1m worth of promotion is planned in 1991.

Bodysprays are another thriving area. Only 20 per cent of men wear a bodyspray in conjunction with an anti-perspirant, say Elida Gibbs, who pioneered the market in 1985 with Lynx.

This £30m brand has been a huge success because it appeals to young males aged 13-35; among teenagers it is seen as a route into male fragrance, say Elida Gibbs.

SB are repackaging their Slazenger Sport bodyspray; new packs will be on shelf in late June. The bold, chunky can replacing the current longline spray dispenser gives a more up-to-date feel and is a more handy size. And the new look, with the familiar panther trade-mark, reinforces the masculinity of the brand, say SB.

Continued on p622

Sniffing out what's on offer

A look at how manufacturers are promoting their products



Cussons say sales of Imperial Leather aerosols are up 14 per cent to 3.8 per cent (value) and roll-ons by 15.7 per cent to 3.4 per cent, following the reformulation and repackaging last year.

To build appeal and encourage trial at the start of the key Summer sales period, Cussons are running an extra-fill promotion on the brand from this month through to June. Aerosols offer 25ml extra free and roll-ons 25 per cent. And the Imperial Leather range, which was supported by a £5m television advertising campaign in 1990, continues to have its "aspirational, luxury appeal" reinforced by Julie Walters.

Colgate-Palmolive are adding a new roll-on variant to the range this month. After Hours is currently available as an aerosol; the roll-on is being targeted especially for evening use away from home to encourage increased use of the category, say Colgate-Palmolive.

This variant appears in both the £2m Press and poster advertising campaign for Soft & Gentle in 1991. Photographs by leading photographers, with the tag line "Underwear by Soft & Gentle", will appear in leading women's magazines, with a complementary high impact poster campaign.



Vichy are launching a new range Dual Security deodorants with Phytoneutral, which will be in pharmacies exclusively from the end of the month (see **Counterpoints**). "As a skincare company, Vichy's presence in the deodorant market is 'premium deodorants which also care for the skin,'" says company pharmacist Cathey Holland.

Bristol Myers updated the packaging of Mum roll-ons recently (*C&D*, February 23, p287). The semi-clear bottles allow Mum's coloured formula to show and a bold brand logo gives Mum greater shelf impact, says the company. A new 50ml size was launched in January, and extra value packs are currently available, and will be again in August and September, offering consumers 20 per cent extra free.

Further promotional activity for the range includes a 20p money-off field coupon and a door-to-door direct mailing operation to build on the success of the 1990 campaign. Bristol Myers say their national television advertising will continue during 1991 with a £2m campaign.



Since Mennen repackaged their range last year, they say that the Speed Stick and Lady Speed Stick ranges have sold well in chain chemists and especially in groceries. The company says that their share of the sticks market is 20 per cent. The sticks market is split as follows: Boots 26.9 per cent, pharmacies 11.4 per cent, drug stores 10.2 per cent, grocery 45 per cent.

In-store promotions, including twinpacks, will continue, and this month Speed Stick is one of Unichem's leading offers.



Carter-Wallace continue to support Arrid with a programme of above and below line activity planned throughout the Summer months.

They launched Arrid essence into a test market last September, calling it a unique concept in the market. It combines "sophisticated designer fragrance" with the "protection and confidence" of Arrid, in Classic, Exotic and Oriental variants.

Gillette are currently running a promotion offering 25ml free on Right Guard aerosols and 25 per cent free on roll-ons. And mixed 12 packs of 200ml aerosols (four each of Vogue, Sport and Original variants) with 20ml extra value are selling at the promotional price of £1.29. The offer will

run again in July and August.

Promotional activity in 1991 includes sponsorship of the Year of Sport. Three Right Guard sports festivals are planned for Strathclyde, Manchester and London during June and July. Travel sizes of Sport and Vogue aerosols will be available from May to July.

Another element of the programme is a £3.7m spend on television advertising, including the "Auction" commercial, featuring Right Guard Vogue variant, aimed at young women.



Gillette's Natrel Plus was supported with an offer of a free weekend pack of 75ml can with 150ml aerosols last month. And the brand is receiving its biggest ever burst of advertising support with a £1.3m campaign in 1991. This includes the "Wolves" commercial and poster support on the London underground. And for the first time cinema screenings of the commercial will run bi-weekly until the end of July.

Elida Gibbs are supporting Sure with a £2.6m million advertising campaign this Spring and Summer. A new television commercial "What a croc", continuing the heat tension and exertion theme and the "tick test" seen in previous advertisements, is running nationally this month; a second burst will be screened from the beginning of June until mid-August.

Kyomi is being supported with a £2.5m marketing campaign including television and Press advertising, and a 75ml trial size retailing at £0.49. Extensive door to door couponing will reach one million households nationally.

Nicholas say their Amplex roll-ons account for 14.8 per cent (volume) of the roll-on market and are stocked in over 40 per cent of pharmacies. They plan to support the brand with a multi media package from July.

THE NEW FORMULA FOR SUCCESS



NEW TRADE APPEAL

- The only OTC Cystitis product which you can recommend with low sodium content
- Clear, authoritative pharmacy literature to help you help your customers
- Full PR and POS back up
- Informative, medically endorsed consumer leaflets
- Recharge your sales — recommend CYSTOPURIN

NEW CONSUMER APPEAL

- Now a simple 48 hour, six-sachet course of treatment
- Each sachet contains active ingredients 3g Potassium Citrate BP
- Easily dissolving granules encourage fluid intake
- Pleasant citrus flavour drinks
- More convenient, more appealing, more palatable and reliably effective
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FISONS
Consumer Health

A Pharmacy Assistant's Competition with real sparkle!

Learn how Vagisil ends feminine moisture problems...

As a Pharmacy Assistant you know that vaginal moisture and perspiration are often a problem for many active women.

And that the modern fashion for tights and synthetic underwear tends to worsen the condition and leads to odour-causing bacteria which can cause itching and chafing of the skin.

Vagisil Feminine Powder, made by Combe International, has been specially developed to end feminine moisture problems.

Read the following information and you'll know why you can confidently recommend **Vagisil** Feminine Powder to relieve feminine moisture problems. What's more, you should then be able to answer the simple questions below and perhaps win yourself a £100 or £50 Ratners Jewellery Voucher.

Vagisil is a microfine, 100% talc-free powder that acts in three ways to relieve feminine moisture problems. **Vagisil** controls moisture, relieves irritation and protects delicate skin. In fact, **Vagisil** actually absorbs moisture 25 times better than talc.



£100 and £50 Ratners Jewellery Vouchers to be won.

Another important point to remember is that **Vagisil** contains a special natural emollient that works like a shield to smooth the skin, protecting it from irritation.

Finally, **Vagisil** contains an anti-bacterial agent that checks odour-causing bacteria.

All women at some time suffer from the problems of excess vaginal moisture, whether due to nervous perspiration, hormonal changes within the body, or a light pre-menstrual discharge.

So when a customer next asks your advice on a feminine moisture problem you'll know the answer – **Vagisil** Feminine Powder, the safe, gentle fragrant treatment from Combe International.

And, remember, if you can give us the answers to the questions below – you could even win yourself a Ratners Jewellery Voucher. A prize with real sparkle!

Vagisil
FEMININE POWDER



...and win a jewel of a prize.

PHARMACY ASSISTANTS COMPETITION

Entry Form

Win a Ratners Jewellery Voucher worth £100 or £50.

Simply answer the following questions (refer to the ad above) and send your completed Entry Form to Chemist and Druggist, **Vagisil** Competition, Sovereign Way, Tonbridge, Kent TN9 1RW by May 31st 1991. The first correct entry picked from the postbag after the closing date will receive a £100 Ratners Jewellery Voucher ... the next two all-correct entries will receive a £50 Ratners Jewellery Voucher each.

Question 1.

Name 2 fashion trends that worsen feminine moisture problems.

- a) _____
b) _____

Question 2.

Vagisil acts in how many ways to relieve feminine moisture problems?

Question 3

Vagisil Powder is how many times more absorbent than talc?

Question 4.

What special **Vagisil** agent helps protect the skin from irritation?

Question 5

Name 3 causes of excess vaginal moisture?

- a) _____
b) _____
c) _____

Name _____

Shop Address _____

RULES

- 1 All entries must be made on a form cut out from Chemist and Druggist.
- 2 This competition is not open to employees of Combe International, their families or any agency of the Company.
- 3 The winners will be the first all-correct entry picked out at random from the postbag after the closing date (£100 Voucher) plus the next 2 all-correct entries (£50 vouchers each).
- 4 The judges decision is final and no correspondence will be entered into.
- 5 The winners' names will be available on request from Combe International after the closing date of the Competition.

Send to: Chemist and Druggist,
Vagisil Competition, Sovereign Way, Tonbridge,
Kent TN9 1RW.

Closing date: May 31st, 1991.

Spoilt for choice

Virtually 100 per cent of women in the UK now use disposable sanpro products, spending on average £10.61 each year, says the Association of Sanitary Products Manufacturers. So while the market is not showing spectacular growth, manufacturers' activities — adding new products and improving consumer choice — are keeping it buoyant

The most striking feature of the sanpro market in recent years has been the increasing diversity of products available especially in the towels sector. Now a concept that manufacturers call wardrobing or the wardrobe approach appears to be the order of the day. This means that women are not simply using one product type, but a variety to suit their changing needs during menstruation.

Recent research conducted by Tambrands found that women use a total of 24 sanpro products during an average period. If tampons are her product of choice, she will use 17, with the remainder being either towels or pantyliners. Or if she prefers towels, 16 will be used, with the remainder being tampons or pantyliners.

Of the women surveyed, 24.8 per cent said they used tampons only; 21.1 per cent towels and tampons; 19.5 per cent towels only; 15 per cent tampons and pantyliners; 12 per cent tampons, towels and pantyliners; and 7.6 per cent towel and pantyliners.

This multiple usage of different products is simply a part of the reason why the market is growing, say Robinson. Personal hygiene has improved, so that women change their towels more frequently. And the menstrual period of today's woman is now longer; during the 1850s the average age for experiencing the first period was 17 whereas today it is 12½, say Tambrands.

An overview

The sanpro market is valued at about £174m (1991 ASPM projection), up 6.7 per cent on last year; in volume terms it is up 3.8 per cent to 329 million units. The split between towels and tampons is 56:44 (volume).

Sancella estimate that in 1990 outlet shares were (1988 figures in brackets): grocers 56 (48) per cent, chemists and drugstores 22 (26) per cent, Boots 19 (23) per cent, others 3 (3) per cent.

Bad news for everyone except grocers, it would appear; but things are not actually as gloomy as they seem, according to David Macfarlane, marketing manager at Sancella. He believes that the decline in the other sectors is slowing down and shares are levelling out.

The decline has been a function of the market: grocers are getting bigger, and consumers are shopping for longer periods of time. So they might buy everything they need for the month, including their sanpro, from the supermarket. It's simply a matter of convenience, he says.

"Chemists are still useful because of the advice they can offer and for emergency purchases," says Mr Macfarlane. But he warns: "The danger is if chemists don't keep pace with the market." In other words, it's no good stocking large amounts of the types of products that are declining in use, and small amounts of the newer, more popular kinds, he says.

Tampons

Within the tampon sector, Tambrands claim a 62 per cent share with their applicator tampon Tampax. Smith & Nephew market digital tampons Lil-lets (claiming 41.2 per cent in pharmacies) and their applicator brand Contour.

Last June, Kimberly-Clark entered the market place with their own brand of digital tampons — Simplicity Freedom, their third venture into the tampon sector. This time their approach is quite different — they have introduced an element of fun into the market. Simplicity Freedom is said to offer a "mould breaking" concept in feminine hygiene with brightly coloured packs of tampons.

It remains to be seen what effect Freedom tampons will have on the sector. Tambrands say that applicator brands continue to be more popular than digital tampons, split 66.6:33.4.

Marketing activity

In February, Tambrands introduced international packaging for Tampax and included additional information on-pack and in their leaflet on the correct usage of tampons, which absorbencies to use, and the risks of toxic shock syndrome (C&D, February 16, p240).

Much marketing activity for tampons is directed at 10-15/16 year olds. Tambrands £1m Press advertising campaign comprises a range of executions, coming on-stream around now, which aim to address common problems and queries associated with tampon use and menstruation.



Promotional activity includes competitions and special offers in a variety of publications, and consumer on-pack promotions. The company also offers a free lecture service to schools. An educational pack or a series of "Body wise" posters, which give information and advice about diet, exercise and puberty, are available.

Kimberly-Clark say they will be continuing their "intense, somewhat radical" magazine advertising campaign for Simplicity Freedom, as part of the £3m advertising spend for the range in 1991.

Smith & Nephew say they consistently

support Lil-lets with magazine advertising; several new ads will be introduced in the £1m campaign this year. The company will shortly be launching a schools educational programme and relaunching Lil-Lets.



Pharmacists can obtain free copies of Tambrands' Bodywise posters from: Bodywise Poster Collection Offer, Consumer Services Department, Tambrands Ltd, Dunsbury Way, Havant, Hants, PO9 5DG

Towels

According to the "Sancella sanpro market report" branded shares are as follows: Kimberly-Clark (Simplicity) 23 per cent, Sancella (Bodyform and Libra) 20 per cent, Johnson & Johnson (Vespre and Carefree) 13 per cent, Smith & Nephew (Dr Whites) 8.5 per cent.

The sector is a much fragmented one. Of the 56 per cent, press-on towels make up 34.4 per cent, pantyliners 19.1 per cent, looped towels, 1.9 per cent and mini-towels 0.6 per cent, say Tambrands.

All the manufacturers are talking about pantyliners! The sector grew 15.9 per cent in 1990, say Sancella. Brand shares are: Carefree 28.2 per cent, Bodyform 20.5 per cent, Brevia 13.1 per cent, Libra 9.3 per cent, and Dr Whites 1.7 per cent.

Flat pantyliners are increasingly popular, say Sancella, up from 52 per cent to 65 per cent; trifolded pantyliners are down correspondingly to 35 per cent.

More and more women are catching on to using them for every day freshness, say Kimberly-Clark. They launched Simplicity Freedom pantliners at the same time as the tampons, in similar, "discrete" packaging.

Towel shares are: regular towels 37.2 per cent (down 5.1 per cent), super towels 35.2 per cent (no change), trifold towels 12.5 per cent (up 20 per cent), shaped towels 10.9 per cent (up 12.8 per cent), and night towels 4.2 per cent (up 22 per cent), say Sancella.

They added a new variant to their Bodyform range last month (C&D, March

Continued on p666

Continued from p665

23, p446). Solo are trifold, individually wrapped, and shaped towels. They are useful particularly when portability is required, say Sancell, who predict that the trifold towel sector will grow a further 18 per cent during 1991.

Marketing activity

Television advertising continues to gain ground: Sancell's Bodyform, Kimberly-Clark's Simplicity and Johnson & Johnson's Carefree have been on screen this year.

Kimberly-Clark are also running in-store promotions throughout 1991. This will feature added value packs, similar to the sampling of Freedom pantliners on the front of Simplicity size 1 and 2 towels last month.

Sancell are offering two extra free towels in Bodyform Solo. In addition extra-fill promotions are running across Bodyform regular and super towels (two free) and pantliners (five free). The brand is also being supported by advertising and product giveaways in women's magazines are planned. In addition Sancell produce two booklets "Girl talk" for school girls, and "Woman to woman" for their mums.

Brand manager Kate Nicholson says range advertising will run on television until October. "This has worked well for us. I think it's pushing the market. But it's more difficult to explain shaped towels on TV, therefore we will be backing this up with Press advertising in magazines such as *Cosmopolitan* and *Women's Own*."



Smith & Nephew's Dr White's Shapes have benefited from a four-month magazine advertising campaign which ended last month, prompting 130,000 requests for trial packs. A Summer campaign is planned.

The green scene

Smith & Nephew's Ecosense environmentally friendly press-on sanitary towel was launched last August. "Ecosense is essentially a pioneer brand, launched in



response to increasing consumer demands in ecologically sound products," the company says. "Ecosense has fulfilled a market niche for sanitary towels which



Robinson's Cameo range consists of looped and shaped press-on towels, and a sanitary belt

combines reliability and practicality with a concern for the environment."

■ The ASPM says that none of its members uses pulp, cotton or rayon which has been chlorine bleached; even products that do are considered not to pose any risk to health by the Department of Health.

Market location: 12 months to December 1990

	% sterling	% growth
Total chemists	27.1	-3
Boots	18.2	-7
Multiples	2.4	+9
Independents	6.5	-2
Total drugstores	15.8	+12
Total grocers	52.9	+9

Source: AGB

Sector size: 12 months to December 1990

	% sterling	% growth	% units	% growth
Press-ons	69.1	+3	57.8	-6
Pantliners	23.6	-13	37.0	+8
Looped	4.6	-3	2.6	-8
Mini	2.6	+7	2.7	-14
Tampons	49.6	+8	43.6	-6

Source: AGB

On the sidelines...

Don't push products for feminine freshness to the back of the shelf. They are an increasingly important part of a personal hygiene routine, say Crookes

"Demand for feminine hygiene products like deodorants and tissues is increasing in Britain," says Sarah Giles, Femfresh brand manager. Femfresh, brand leader in the £1.25m non-sanpro feminine hygiene market, is benefiting from this trend, she adds.

Most importantly, though, is the huge potential for further growth that exists, says Ms Giles. "Much more mature markets exist in the USA and also Europe, where feminine hygiene is big business. As with so many products before, there is clear evidence that where the USA leads in terms of market developments and consumer



Combe will be promoting Vagisil with advertisements in a large number of women's weekly and monthly magazines, and specialist and national Press until November

trends, Europe and Britain quickly follow," she explains.

Sales of their "flagship", Femfresh deodorant, have risen by 7 per cent (volume) over last year. But it is the two Femfresh tissue products that are helping to attract new consumers into the market; the 12 tissue pack has grown 11 per cent over the past year, Ms Giles says.

Crookes are building on this, with a package of activity. With the Summer sales boost approaching, much of the support will concentrate on the convenience of Femfresh in hot weather and when travelling.

An all year round sampling programme will include an exclusive deal with Britania Airways to provide Femfresh samples to all women holiday-makers at the start of their journeys. In addition Crookes are producing "Look good, feel fresh", a guide to doing just that, which will be distributed through women's magazines. Other support includes competitions in regional newspapers.

HERE'S A FACE YOUR CUSTOMERS CAN TRUST.



It's the reassuring face on all Numark feminine hygiene products, including our new Night Time press-on towels.

Made from environmentally-friendly pulp, our range of eight towels and panty-liners offers your customers



a competitively priced product while at the same time giving you up to 30% profit on return.

For more information on our complete range of reliable feminine products just contact Phil Duckworth on (0827) 69269.

NUMARK

NUMARK HOUSE, 5-6 FAIRWAY COURT, AMBER CLOSE, TAMWORTH BUSINESS PARK, STAFFS B77 4RP.

Shock horror!

The subject of tampon-related toxic shock syndrome (TSS) is highly controversial. On the one hand, manufacturers say they have taken steps to ensure that women using their products are aware of the risk of this rare disease; on the other hand, pressure groups are campaigning for, among other things, more information for tampon users and additional warnings on packs. Virginia Watson, MRPharmS, investigates

In July last year a Private Member's Bill, the Tampons (Safety) Bill, was introduced into the House of Commons. One of the requirements would be for all tampon packs to carry a "warning notice" stating that "tampons can cause toxic shock syndrome which can be fatal".

Toxic shock syndrome (TSS) is a rare illness which can occur in men, women and children. It was first described in 1926 and early reports often refer to it as staphylococcal scarlet fever. One form occurs in menstruating women, usually using tampons, and in the UK there are on average ten confirmed cases each year.

The illness is caused by a toxin produced by some strains of *Staph. aureus*. At first it resembles the pattern of many infections but is quickly followed by the appearance of a characteristic rash and a sudden fall in blood pressure leading to organ damage and failure. Death may result. The acute phase of the illness lasts for up to five days and skin peeling occurs one to three weeks after onset of symptoms. Normal health returns within a few weeks although some patients have reported a much slower recovery, impaired concentration and loss of fingers or toes due to necrosis.

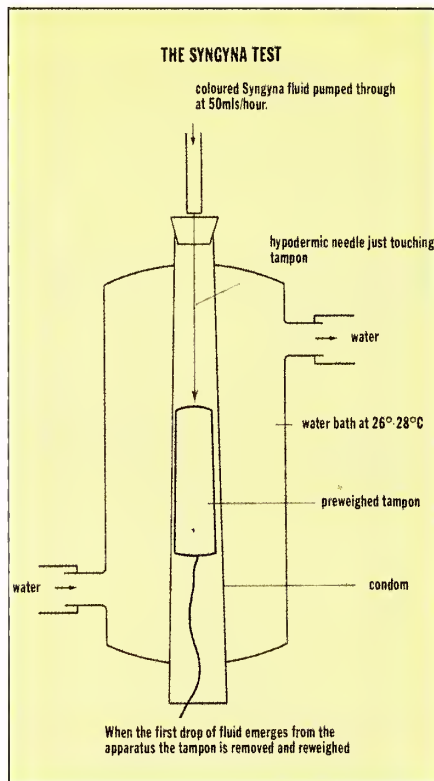
To be classified as TSS all the four major symptoms must be present (see table 1) and supported by bacteriological investigation. TSS responds to antibiotic therapy but because severe symptoms develop rapidly it is important to start treatment promptly.

Table 1. Signs and symptoms of TSS

- * High temperature $>38.9^{\circ}\text{C}$
- Nausea and vomiting
- Sore throat
- Dizziness
- Diarrhoea
- Abdominal cramps
- Malaise
- Arthralgia ie aching, painful joints
- Myalgia ie muscle pain
- Conjunctivitis
- * Erythematous rash with desquamation esp. hands & feet
- * Hypotension — due to hypovolaemia
- * Failure of three or more organ systems
- * must be present for TSS classification

The incidence is highest in women under 30 years. Susceptible patients do not demonstrate any antibody to the toxin. Following an attack immunity is slow to develop and second or third attacks (usually milder) may occur subsequently.

Staph. aureus is naturally present in about a third of the normal healthy population. Why tampons stimulate a harmless bacteria to produce a harmful toxin is not yet understood. The outbreak in the USA, when the link with tampons was first noted, was associated with a very high absorbency, polyacrylate rayon tampon. Withdrawal of the tampon from the market led to a drop in incidence from 17 cases per



100,000 menstruating women to 1 per 100,000.

The bacterial population of the vagina is unstable and affected by many factors including age, diet, hormones and hygiene. During the menstrual years it is significantly different from that of the pre- and post-menarche. Tampons cause fluid transfer and loss of cell cohesion in vaginal epithelial cells and it is suggested that the toxin may enter the circulation through micro-urulation. The high absorbency tampons have been found to support *Staph. aureus* growth for longer and are also more likely to cause greater epithelial damage. The polyacrylate rayon tampons (which have never been available in the UK) have been found to stimulate TSST-1 production; this could be due to chelation of certain ions, eg magnesium, by this superabsorbent material leading to a change in the bacterial environment.

Applying pressure

The Women's Environmental Network (WEN) has been running an awareness campaign since 1989 to alert women to the risks and symptoms of TSS. They have reports of over 50 cases, including two deaths, occurring during 1990. It is unlikely that all can be classified as TSS because of the very strict diagnostic criteria.

WEN is the pressure group behind the Tampons (Safety) Bill and many of their demands regarding additional printed information on tampon packs and leaflets

are included in the Bill. Many of the requirements have been met already by the tampon manufacturers with package inserts describing TSS and the action to be taken if symptoms develop. Reference is made to the use of lower absorbency tampons and a statement on the packs advises the user to read and retain the leaflet.

At present the absorbency of tampons is expressed as mini, regular, super and super plus. The Bill proposes that absorbency be described numerically, as grammes of fluid absorbed using a standardised Syngyna test. This test is used currently by the sanpro industry as a laboratory method for comparing the construction and composition of different tampons. It does not reflect the conditions to which a tampon is subjected when in use; the volume of fluid absorbed by a tampon in the laboratory situation is much higher than when worn.

WEN are also concerned that apart from TSS, tampons may have other adverse effects on health and are a source of environmental pollution. The manufacturers regard such concerns as overstated.

The advertising campaign and the generation of magazine articles by WEN is important if, as some believe, TSS and related infections are not being recognised. Current data may not reflect the true situation. The Association of Sanitary Protection Manufacturers believe that some of the information supplied by WEN is misleading and inaccurate.

The advisory role

Pharmacists, as front line health professionals, will be among the first involved if more cases of TSS and related infections are recognised as a result of increased public awareness.

If publicity causes concern, customers should be advised to observe the recommended guidelines for use (see table 2). They should be reassured that an isolated symptom is unlikely to be TSS but persuaded to see a GP if several symptoms appear. It should be stressed that TSS is rare.

Table 2. Guidelines for tampon use

- Wash hands thoroughly before and after inserting a tampon
- Use the lowest appropriate absorbency
- Change tampon every 4-6 hours
- Do not use a higher absorbency tampon as an alternative to frequent changing
- Never leave a tampon in for more than 12 hours
- Always remember to remove the last tampon
- Use only during menstruation
- Immediately remove the tampon if any of the symptoms of TSS occur and consult a doctor
- Alternate tampons with sanitary towels eg at night

IMPORTANT ANNOUNCEMENT

The recent report from the Government Working Group on Dietary Supplements and Health Foods confirms recent media coverage and public concern about quasi-medical products. Little wonder chemists have been wary about stocking alternative treatments, despite growing consumer demand.

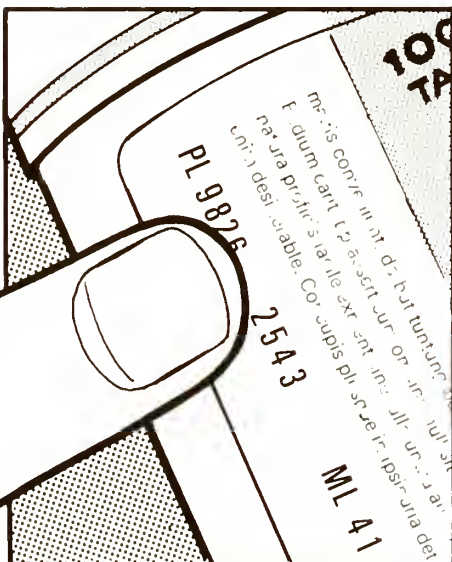
Only one category of complementary medicine is currently fully licensed - herbal medicine. A product with medicinal claims may only be sold if it has a Department of Health licence - and to gain this it must meet the same criteria as allopathic drugs.

The report indicates that strict enforcement of new EC

laws and greater controls are essential to guarantee consumer protection. But meanwhile, the safest course of action for you and your customers is to stock only **licensed** herbal medicines.

Potter's now hold nearly 150 full product licences - backed by almost 200 years of specialist knowledge and experience.

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Practising for the future?



Gill Hawksworth opened her pharmacy in Mirfield just before the new contract came into effect at the end of 1986 in response to a request from the community health council.

She took over new premises in a suburban location near a supermarket and opposite a single-handed GP practice which closed 12 months later, leaving the nearest doctors two miles away. Gill took out a bank loan putting up her house as collateral and borrowed stock on extended credit from a local Numark wholesaler.

She designed the shop herself for maximum patient benefit, with double opening doors with a ramp for wheelchairs and prams and a wide shop area uncluttered by stands. There is a semi-private discussion area, and an advice room for private counselling and diagnostic testing.

Thriving business

Four years later, against the odds, the business is thriving, putting into practice many of the services currently seen as forming part of pharmacy's future development. "My number one priority is the health and welfare of the community I serve," says Gill. Each member of staff is St John Ambulance trained and specialises

Two practical working examples of what pharmacists might aspire to in pursuit of an extended role were presented to the Institute of Pharmacy Management conference at Hereford last weekend



Home visits and health promotion on offer

in one area of healthcare.

The practice leaflet she has produced lists all the services the pharmacy provides, including patient records, home visits, free prescription delivery, pregnancy testing, blood pressure checks, cholesterol screening and health education. There has been a great deal of interest from other local pharmacists who would like to copy the format, she says.

With the local town of Dewsbury being the "world centre for heart disease", Gill says she is extensively involved in health promotion. In her first year she discretely advertised her willingness to make domiciliary visits. This is done in her own time, and as with all the services she provides, detailed records are kept.

Local GPs appreciate the prescription delivery service and often drop scripts in after visiting

patients. PMRs were introduced in her second year of business — a big advantage — and blood pressure monitoring came fully on stream in year three.

Last year saw the installation of a cholesterol testing service for which a £5 fee is charged. This is below the £7.50 recommended by suppliers but is seen as more acceptable by customers. Liaison with other healthcare professionals, especially GPs and district nurses is very good, says Gill. Each of her preregistration students spends a day with a local GP both in the surgery and out on visits.

"While acknowledging the professionalism of other pharmacies, assuming imitation is the best form of flattery, it would appear that the pharmaceutical service in the area has increased following my initiatives," says Gill.

Value of pharmacy services

When the economy is in its worst state for years it does no harm to emphasise the cost effectiveness of pharmacy services, according to Gill Hawksworth. A Government under pressure to spend more on the NHS would do well to remember that maintaining the existing pharmaceutical service goes a long way to keeping costs down.

"The key to the future is to ensure that our skills are not

undersold as we adapt to a new environment," she said. Further training and education is important to maintain standards.

"But it would be unrealistic to acknowledge the development of pharmacy without a firm reassurance from government for funds to help with extended roles, as from experience, much unpaid time is taken up in this way once services are established," said Mrs Hawksworth.



The potential...

Jim Furniss, assistant secretary, Family Health Services Division, Department of Health, gave an insight into what he saw as the potential for community pharmacy, and the areas pharmacists needed to address.

He highlighted the high users of pharmacy services, the elderly, children, and pregnant and nursing mothers. Only 16 per cent of scripts are now paid for, he revealed. Less than 5 per cent of the elderly are in residential homes, and while 65 year olds and over make up only 15 per cent of the population, they account for 40 per cent of the drugs bill.

"Is there more community pharmacy can do to promote effective use of drugs by the high user groups," he asked. He revealed that the Department is shortly to fund some pilot projects with patients discharged from hospital, where an FHSA facilitator will link with a local community pharmacist, allowing a transfer of care.

The extension into the community of "high tech" treatments such as CAPD — which will shortly be available on the Drug Tariff — and parental nutrition also provided areas for potential pharmacy involvement. He drew attention to the fact that the change in the law which allows a pharmacy to be paid for services has yet to be invoked.

There is considerable scope for providing more and better services in a non-institutional setting as a result of current Government policies. "But pharmacy will have to convince us of the benefits," Mr Furniss said.

Looking at broader horizons

Associated Chemists (Wicker) Ltd is a peculiar beast. It was formed in 1951 as one of the first consortium owned pharmacies in the country. Virtually all the independent pharmacists in Sheffield joined to fund a central organisation to provide an extended hours pharmaceutical service.

The premises are on the outskirts of Sheffield city centre and have been open every day since February 1952. There were 43 shareholders in 1951. This has now shrunk to 32, and the idea of consortia seems to have fallen out of favour, says managing director Martin Bennett.

His experience is that an extended hours pharmaceutical service is essential. In small towns this can be covered by a pharmacist on-call, but in larger areas with a population over 15,000, then a late night pharmacy is the only answer, he says.

He is critical of the current remuneration system which makes no allowances for the extra staff and overhead costs involved in running an extended hours service, and calls for additional payments for such pharmacies.

Associated Chemists has always been an ethically orientated business. In 1979 the pharmacy was extended by incorporating two adjoining properties, and the company started supplying aids to the disabled. To avoid problems with using a restricted title in advertising this part of the firm started trading under the name of the Handicapped Living Centre.

The pharmacy provides a broad range of services, all detailed in a practice leaflet. They include a body check centre, diabetes screening, fertility testing and industrial medical supplies and mastectomy appliances. A 6ft gondola displays

health promotion literature. The pharmacy operates a syringe and needle exchange scheme. A large area for incontinence products is open to the public, but separate from the pharmacy proper. The shop stocks a range of medical equipment for GPs.

A 42-page catalogue is available from the Handicapped Centre, making it the largest such centre outside London. Lines available range from commodes, wheelchairs, and walking frames to bath and kitchen equipment. The average pharmacy should be encouraged to supply some of this type of equipment, but because of the physical size and complexity of specialised items, regional specialised pharmacies are required, argues Mr Bennett, at around one per 300,000 of population.

The problem of funding could be overcome by a voucher system, with health authorities authorising occupational therapists to prescribe a voucher covering the cost of a basic version of the required equipment. Patients could trade up if they wished from their own pocket.

The supply of ostomy and urine drainage equipment has mushroomed in recent years, and so have appliance suppliers at the expense of pharmacy, says Mr Bennett. The reason is the method of payment, where appliance contractors are paid a simple 25 per cent on-cost, while pharmacists are lucky if they break even. Payments should be standardised so that any contractor supplying similar services is paid the same amount. Mail order "contractors" should be paid less than those with a fitting room and trained staff.

Sheffield FHSA has a health promotion budget approaching £2 million this year. Mr Bennett



Associated Chemists (Wicker) Ltd questions the emphasis on GP clinics as the best way to spend this money. A joint survey by the FPC and CHC last year showed that while 13 per cent of the sample had visited a surgery in the previous three months, over 33 per cent had visited a pharmacy (see p632).


Mr Bennett is critical of FHSA's which have set up "health shops" in city centres,

overlooking the fact they are already there cunningly disguised as pharmacies. He envisages pharmacies with a shelving section and perhaps a window display devoted to the FHSA. The Authority should also organise regular DUMP campaigns. Each pharmacy should be equipped with a one-way tamper-proof DUMP bin to allow anonymous return of medicines.



IPMI chairman Gerry Green (right) with Martin Bennett of Associated Chemists (Wicker). Mr Green praised the services both pharmacies offered but questioned whether all pharmacies could support such a range of services, especially where overhead costs and rates meant the costs to the patient would have to be higher

"I explained profit to mum today.."



all she understood was that

TENDER CARE

had something to do with it"

Chris Robey claims he knows more!

Phone him on 0207 590593

Blue Ridge Care Ltd., Medomsley Road, Consett DH8 6SX.

C&D reports from Balliol College, Oxford, home of the 1991 Guild of Hospital Pharmacists Weekend School

BMA president tells pharmacists to be proud of their work

In these times when anti-professional attacks are on the increase, all professions should, in their own way and with justification, be proud and confident in their work. "As professionals, we shall see better days ahead, because they need

us," said president of the British Medical Association, Dame Rosemary Rue.

In a speech formally opening the Weekend School, Dame Rosemary Rue said the Guild plays its part in maintaining the honour and integrity of pharmacy.



National standards needed

National standards are required for the evaluation of the clinical pharmacy service on hospital wards, says Richard Copeland of the Leeds General Infirmary.

Mr Copeland, winner of the 1990 ICI Travelling Fellowship, said evaluation methods did not provide complete solutions, but they are valuable, particularly within individual institutions.

In a study at the LGI, conducted over two ten-day periods by the clinical pharmacists in the hospital, some 256 interventions were recorded. After assessment by independent medical assessors, 35 per cent were found to be moderately significant, 25 per cent significant and 7 per cent very significant.

Mr Copeland said that clinical pharmacy proved difficult to evaluate as it could be thought of as a service definition or a philosophy. In the past researchers had concentrated on the cost implications — the tangibles — of interventions in attempts to define its worth. Only in a few areas — pharmacokinetics, nutrition and participation in anticoagulant clinics had researchers attempted

to include outcomes.

Mr Copeland had visited a number of centres in the USA to investigate their evaluation procedures. One study at the University of Illinois in Chicago had found that 83 per cent of interventions had been independently assessed as "significant" with annual cost avoidance of \$888,000.

At the Michael Reese Hospital in Seattle, an ongoing study in which interventions were made in the treatment of community-acquired pneumonia according to a strict protocol, had lowered drug costs and reduced the febrile period.

Mr Copeland said that it was 13 years since the cost-benefits of clinical pharmacy individualisation of aminoglycoside dosage in burns patients had been demonstrated. "But do all burns units utilise such a service?" he asked.

"Demand must come from clinicians and patients; they must be made to realise that our service is necessary, that pharmacists have an ethical and legal responsibility towards patients," Mr Copeland said.

Guild first in MSF election

For the first time in Guild history, hospital pharmacists are among the sponsors of a candidate for the general secretaryship of the parent union.

The London Group of the Guild, which forms a branch of the Manufacturing Science Finance union in its own right, is one of the sponsors of Roger Lyons, one of the two candidates in the forthcoming election. Mr Lyons is said to represent the decentralist position of the old ASTMS, who merged with the centralist TASS to form MSF in 1988.

■ At the Saturday night banquet, Neil Henderson, marketing

director of Evans Medical, presented the Evans Gold Medal for services to hospital pharmacy at a national level to Arthur Williams, chief administrative pharmaceutical officer of the Grampian Health Board, and professional secretary of the Guild 1986-90.

The Evans Silver Medal for services to hospital pharmacy at a local level was presented to Leslie Pielou, director of pharmacy for the Eastern Health Board in Northern Ireland.

The 1992 Weekend School, on "Gastro-enterology", will be held in Leeds.

Re-uptake blockers for depression

Reports of aggressive and suicidal behaviour of patients taking fluoxetine (Prozac) were "very worrying" as they suggested an involvement of the 5HT pathways in aggressive behaviour, Dr Phil Cowan, senior clinical scientist, section leader and honorary consultant psychiatrist at Littlemoor Hospital, told the Weekend School.

Dr Cowan said the reaction was caused by stimulation but he thought it "stirs people up" rather than causes aggressive behaviour. "Think of it in the context of someone feeling awful who then gets unbearably tense. I've seen it in a couple of my own patients who have got agitated."

Dr Cowan said recent evidence suggested depressed patients have a reversible deficiency in brain 5HT neurotransmission. Support for this view came from studies in which other markers of 5HT release — including the release of growth hormone from the anterior pituitary — were absent in depressed patients when dosed with the 5HT precursor tryptophan.

It appeared that it was 5HT re-uptake blockade linked to 5HT_{1A} autoreceptors on the pre-synaptic membrane that give drugs an antidepressant activity. "Tricyclics block the re-uptake of 5HT and noradrenaline but they have many other effects. They are used because they are effective, but their toxicity in overdose is becoming a problem."

He said selective 5HT re-uptake blockers, including fluoxetine, fluvoxamine, paroxetine and sertraline appear to be effective, while not associated with the anticholinergic, cardiotoxic, and

cognitive impairment effects of the tricyclics.

Dr Cowan said they were more expensive than the tricyclics, (and with a high relapse rate of treatment that could be important), but 5HT re-uptake blockers have been studied widely and while they are less effective than the tricyclics, they are more effective than nothing.

"It took a long time to prove tricyclics work and most people would agree it's unethical to test a new drug using a placebo study in depressed patients, so most studies so far have been on moderately depressed outpatients. How these drugs would fare in very depressed patients is a matter of psychiatric interest."

Dr Cowan also said that buspirone, a 5HT receptor agonist marketed as an anxiolytic, looked as if it may well have antidepressant activity, by decreasing the sensitivity of the auto-receptors, thereby increasing 5HT transmission.

Prospects improve for Alzheimer's

Prospects are improving for Alzheimer's disease sufferers with research progressing on a number of fronts.

Referring to work on a cholinesterase approach to the disease, Professor G Wilcock, professor in care of the elderly at the University of Bristol, Frenchay Hospital, said: "I am modestly optimistic that in the next 12-18 months we should see a tranche of drugs being licensed for Alzheimer's disease treatment under the supervision of hospital clinicians."

Tests on the brains of Alzheimer's sufferers had identified large reductions in acetylcholine compared with the

Pharmacists and resource management

It is up to individual pharmacists to make sure that resource management of the drug budget is an opportunity, not a threat, Janet Bass of the Freeman Hospital, Newcastle-upon-Tyne told delegates in one of the Weekend School's workshop sessions.

The workshop discussed the problems of assigning drug costs to individual patients, either by retrospective analysis, or some form of computerised prescribing or administration. But given its implementation — and computer packages are already being trialled — Ms Bass said there would be benefits for both hospital management and the profession.

For the hospital, drug costs

could be compared with a national average; high spending consultants and treatments costing more than the contract price could be identified; and the relative costs could be used as cost predictors for extra treatment options. "It will eventually allow all hospitals to work out what their strengths are," Ms Bass said.

For the pharmacist, it would make possible effective drug utilisation review. "It will also enable us to get fully involved in clinical audit as the data will be akin to PACT level three." Resource management systems would also help identify administration errors.

Gilby serves second year; Ashford rises

John Gilby has been re-elected president of the Guild of Hospital Pharmacists for a second year. Ron Pate has been re-elected vice-president.

There is a change at professional secretary and Practice Committee chair, where Blackpool district pharmaceutical officer Jeff Ashford moves up to take over from Arthur Williams.

Bob Timson stays on as chairman of the Guild's negotiating team, now heading up



Jeffrey Ashford

a new Terms and Conditions Committee. Chris Cairns takes over the chair at Education and Science.

In the elections for Guild Council, among the new members are Anthony Oxley, of the South Yorkshire Group, and Gerry Wilson, of North Wales.

brains of unaffected people of the same age. In 1986, researchers working with tetrahydroamino-acridine (THA) released a paper which provoked great controversy in its claims for improvement in patients, Professor Wilcock said. "But it looks as though in some people THA may well be shown to cause some improvement for at least part of their disease. It's never going to be a cure and the benefits are only modest."

Other workers were investigating 5HT (serotonin) pathways. Early studies with reuptake blockers and 5HT1A agonists had failed in Professor Wilcock's view because the researchers were looking only for signs of cognitive improvement. "In fact there is some evidence that 5HT may cause behavioural improvements in the aggression and wandering that some patients develop. This may not seem important, but it has cost implications if the carers are

unable to cope because of the behavioural problems and the patient has to go into a home."

Professor Wilcock said the development of nerve growth factors might provide a further approach to the treatment of the disease. Three factors, known as NGF, NT3 and BDNF had been identified. In tissue culture, all had been found to cause cells from the medial septal tissue to grow and produce acetylcholine. Structurally, all had similar elements and may provide the start point for new drugs having a nerve growth factor effect, he added.

■ Asked if he gave any credence to the theory that high levels of aluminium might cause Alzheimer's disease, Professor Wilcock said he didn't think it was very likely, though some people may be sensitive to it. On the other hand, the pathological changes occurring in Alzheimer's may cause aluminium to accumulate, making it a marker, rather than a causative factor.

No escape from reforms, says Guild president

All hospital pharmacists will be affected by the NHS reforms which came into force on April 1, says Guild president John Gilby.

He reminded his audience at the Weekend School banquet of the contents of the working documents on the White Paper "Working for Patients". Paper 1 on self-governing hospitals "clearly has implications for us all in that Whitley terms and conditions of service need not be followed by trusts."

"I believe NHS trusts will be the leading organisations for change, and every department will have to justify its cost-effectiveness," Mr Gilby said.

Working Paper 2 signalled a move towards a competitive environment, one in which pharmacists will be increasingly challenged. Papers 3 and 4 on GP fundholding had already led to the appointment of FHSA pharmacy advisors who were beginning to ask hospital pharmacists about drug choices.

Only in Paper 10 was there a let up, with a glimmer of hope about pre-registration pharmacy training. "At last, it has been recognised as an essential part of hospital pharmacy. No other



John Gilby

pharmacy training is protected in this way," Mr Gilby said.

"Hospital pharmacists are as good if not better than most other departments at handling information," Mr Gilby said. "You have to show you can make a positive contribution to the NHS."

"There are threats to the development of the pharmacy service. But we as a group can use the skills and strengths we have to make the most of the future," Mr Gilby concluded.

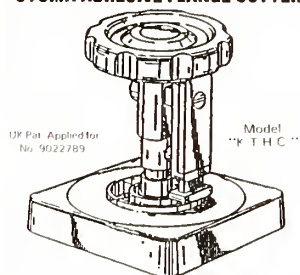
Fight narrow view, says Grahame-Smith

Hospital managers are in danger of seeing pharmacists only in terms of budgetary management and ignoring the important professional role they have to play, says Rhodes Professor of Clinical Pharmacology Professor D.G. Grahame-Smith. "I am alarmed at the narrow view being taken of pharmacists," Professor Grahame-Smith said at the Weekend School banquet. "You

are going to have to make your role known to them time and time again until you are sick of saying it, or we shall lose the very considerable skills you have in drug therapy."

Professor Grahame-Smith said that as a member of the Nuffield Inquiry he was impressed by pharmacy's devotion to its profession, its serious nature and its reluctance to rock the boat.

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Future role: funds available but prove value for money

Money is available for the extended role provided community pharmacy can prove it has something to offer, Roger Odd, head of the Society's practice division, told Buckinghamshire Local Pharmaceutical Committee's conference at Aston Clinton on Sunday.

The community pharmacy is a centre for the provision of services, said Mr Odd, and the pharmacist should be seen "up front". Although he believes that dispensing will continue to be the key role in the future, the provision of advice on symptoms and minor ailments is also likely to be developed. Mr Odd advised pharmacists to ensure highest standards so that the public knows that a pharmacy is a professional place.

Community pharmacy has two main tasks for the future, Mr Odd told members — to develop existing roles and to take on new, extended, roles. One of the biggest roles for the future was advising GPs on prescribing. Pharmacists have a golden opportunity to approach doctors and offer help and advice, he said.

Cholesterol testing, lung

function tests, urine analysis and pregnancy tests were all services that could be developed, although Mr Odd did not envisage this would apply to every pharmacy. It was necessary to have the correct facilities and the time and staff to carry out the tests and provide counselling.

As the elderly population increases, domiciliary services would also increase in importance, said Mr Odd.

Mr Odd also suggested a system whereby pharmacists would have some mechanism to refer patients to their doctor using an official form. The holding and dispensing of repeat prescriptions, and involvement in home chemotherapy and nurse prescribing were also highlighted.

Mr Odd then posed the question on everybody's lips — "How are we going to get paid for it all?"

"Pharmacists can be and should be suitably remunerated," he said, "but services must be cost effective and produce savings in the total healthcare bill as well as benefits to patients."

Health education and promotion should be developed. "We are in an age when people



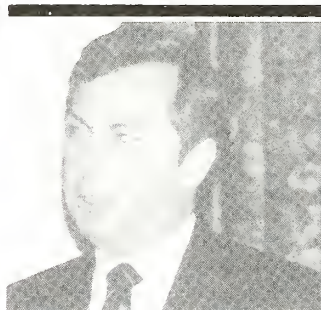
Roger Odd

want to seek this information and what better place than a pharmacy to provide it." Leaflets do work, he said, provided they actually get into the hands of the patients. He pointed to the 14,000 replies received by the British Heart Foundation to one of its leaflets.

Involvement in the treatment of drug abuse is of real importance at the present time, Mr Odd said, but should only involve pharmacists with the right facilities and the ability to work in the community.

Mr Odd also highlighted:

- ☐ Moves to get a wider range of medicines available for sale through pharmacies
- ☐ Developing the supply of dressing and appliances
- ☐ Providing specialist advice and equipment
- ☐ Dealing with returned medicines
- ☐ Providing health education to schools and industry.



John Vooght



Dr Angela Alexander

Discuss CE with FHSAs

Local pharmaceutical committees should ensure that continuing education is on the agenda of any discussions with family health services authorities, advises Dr Angela Alexander, learning facilitator with the Oxford Regional Health Authority.

"FHSAs are the purchasers of your services and you are the providers," she told the Buckinghamshire LPC conference, and some negotiations should be possible. Some LPCs are further ahead than others, particularly Liverpool LPC who have sent a list of possible services to their FHSA.

Barnet FHSA are considering asking pharmacists to undertake a course on health promotion, said Dr Alexander, pointing out that if they were to stipulate this then they should provide funds.

LPCs should also ensure they liaise with course tutors to be appointed by the Centre for Pharmaceutical Postgraduate Education. Dr Alexander believes it is important that continuing education courses reflect local requirements.

On an individual basis, pharmacists should consider their own training needs and those of their staff, she said. They should be aware of what courses are available locally and keep a record of any participation.

On the question of remuneration, Dr Alexander said that any arrangement should cover costs and provide some financial incentive. There should be an undertaking of x hours of study over y years, possibly three or five years to help those taking a career break. There should also be an undertaking to attend a balanced range of courses, she said.

The lack of time, and the cost and availability of locums were often used as reasons for non-attendance. This amounted to a form of boycott, Dr Alexander said, adding that she hoped that if remuneration does become available then pharmacists would take up the CE cause.

"The emphasis of continuing education has changed from knowledge based to skills and attitude based," said Dr Alexander. This was illustrated by the Chinese proverb:

"I hear and I forget,
I see and I remember,
I do and I understand."

Learning in the past had been didactic but was now more interactive, she said. Although role playing was not appreciated by all it was effective, particularly if a video recording is available.

Bucks survey: local problems

A questionnaire sent to pharmacy contractors in Buckinghamshire has revealed a number of local problems, John Vooght, chairman of the LPC, told the conference.

Mr Vooght, also the pharmacy member of the FHSA, addressed the conference hoping to gain feedback on a number of ideas.

A questionnaire sent to 103 contractors had a response rate of 82 per cent, he said. The first thing noted was that there were now twice as many pharmacist employees as proprietors in the country.

Discussing the obvious variation in opening hours, Mr Vooght revealed that 76 per cent stayed open during lunch hours but only two stores specifically stated that the pharmacist was available at all times.

Late night opening in some areas meant that there was no longer a need for a regular rota service, the survey revealed. Members present felt that the LPC should undertake a review of these services town-by-town.

Another problem was that 14 contractors did not know whether they were in urban or rural areas. Other points revealed:

- ☐ 60 per cent of contractors provide a delivery service
- ☐ 42 premises regularly employ locums
- ☐ 47 per cent are computerised with PMRs but 27 stores had no immediate intentions in that area
- ☐ 47 per cent provide services to residential homes
- ☐ 28 shops have counselling areas.

Mr Vooght also detailed a study by Milton Keynes Community Health Council who had produced a list of things they wanted to see in pharmacy premises. These included access for the disabled, displayed details of opening times and services, a private counselling area, double checks on prescriptions, health leaflets, a pharmacist to advise on minor ailments, and well trained ancillary staff.

"In the brave new world of the 1990s we must be more consumer orientated," he said.

From April 1 carers of the elderly were no longer insured to give medicines to patients in their own home, Mr Vooght said. "This might be a great opportunity for input by pharmacists to train the carers."

BUSINESS NEWS

Unichem buy Plymouth pharmacies

Unichem have bought the four pharmacies in Plymouth for £1.42 million cash as part of their strategy to form a franchising chain.

The vendor of the small multiple, Geoff Hurst of Promplete Ltd, plans to retire and live abroad.

Unichem still have a £25m plus cash "molehill" from their Stock Exchange flotation last November. Nevertheless, part of the purchase price from Promplete is to be deferred for 18 months.

The pharmacies consist of three freehold properties and one leasehold. Unichem say they plan to retain the freeholds involved.

Unichem director David Walker told *C&D*: "At this stage the likelihood is that the existing pharmacy managers will become the franchisees". Promplete's existing staff of 30 will be retained, say Unichem.

The company now has five pharmacies in all, the first of which is already undergoing refurbishment as a franchise outlet.

More purchases are on the way according to Mr Walker. "Three more pharmacy purchases are being completed this week, one a single business the other a pair of shops. One of these deals is likely to involve Unichem shares rather than cash."

Unichem plan for the four Promplete pharmacies to be franchised units by Autumn this year.

Retail prices increased by 0.4 per cent in March, raising the RPI to 131.4 (January 1987 = 100). The tax and price index, which measures the change in gross income to maintain purchasing power, stands at 124.9 (January 1987 = 100), an increase over the previous 12 months of 7.8 per cent.

Holland & Barrett and Kingswood go to Lloyd

Allen Lloyd is buying Kingswood-GK and Holland & Barrett from Booker for £55m cash. A rights issue to bring in £73.8m will fund the purchase and store development, and eliminate gearing.

The deal is scheduled to go through on May 7. Lloyds Chemists will then have 989 stores: 617 pharmacies, 181 drugstores, and 191 health stores.

Announcing the move Mr Lloyd said: "Booker wanted a quick deal and phoned me four weeks ago. I believe they wanted to reduce gearing after their recent acquisition of Fitch Lovell."

Mr Lloyd estimated it will take 3 months to consolidate administration and distribution once the deal has gone through and 3-6 months to re-badge the new pharmacies. "The acquisition of Kingswood-GK will expand Lloyds' store network in London and the South East where we have limited representation. All the pharmacies will be converted to the Lloyds Chemist trading style and will be serviced by our existing distribution system."

"Holland & Barrett is a logical extension of existing activities and will give us a third retailing division."

£48m of the agreed price is for Kingswood-GK, the remaining £7m for H&B.

Last year Kingswood-GK, the fifth largest pharmacy chain in the UK, had a turnover of over £62m and made a gross profit of £18.6m. It has tangible assets valued at £10.3m at the end of last year.

The health products chain Holland & Barrett turned over more than £48m last year, a decline on the £50.4m achieved in 1989. Gross profit was up slightly however, at £21m. Eight of their 191 stores are franchise operations. The book value of H&B's tangible assets is £8.3m.

Holland & Barrett's product lines overlap with Lloyds' ranges in healthfoods, medicines,



Chief executive Allen Lloyd

vitamins, specialist cosmetics, dietary supplements and some toiletries. Lloyds plan to increase this overlap by introducing new product ranges into the H&B stores and by selling H&B products in their pharmacies. Nevertheless, Mr Lloyd is determined to preserve Holland & Barrett's separate identity.

Mr Lloyd has made no decision about redundancies: "I don't know the staff at all; I will go and meet them first," he told *C&D*.

Both the 1,344 employees of Kingswood-GK and the 1,252 employees of Holland & Barrett will have their rights, including pension rights, safeguarded, say Lloyds.

Lloyds intend to introduce their 1,200 own-label products into the Kingswood-GK pharmacies.

The underwritten rights issue of just over 32m ordinary shares offers one share for every two ordinary shares held and one for every 3.1 preference shares. While Allen Lloyd will take up his share options neither his wife nor his brother will, diluting the family holding slightly from its current 27.8 per cent.

Lloyds intend to recommend a 50 per cent increase in the final dividend to 3p, making a total dividend for the year of 4.17p.

AAH content with Glaxo agency

AAH Holdings executive director Bill Revell has pronounced himself "entirely satisfied" with the agency agreement the company has signed with Glaxo.

"This is simply a wider application of a concept which has had some profile in the past," he told *C&D*.

"In Northern Ireland we are the agency distributor for a number of pharmaceutical manufacturers, where we distribute to other wholesalers on the manufacturers' behalf. And if you take the hospital market, we are also some manufacturers' appointed agents."

"The Glaxo agreement will make no difference to retailers. Previously we resold at Tariff price with a competitive discount to retail pharmacies related to the level of trade. A relatively small component of this covered our cost and profit. Now this will be covered by an agency fee instead."

"Pharmacies will order from wholesalers as normal but will be presented with a Glaxo invoice instead of one of ours, and the level of discount will be one that Glaxo sets rather than we set."

"The negotiation was a good dialogue between both sides and both sides are comfortable with the result."

He said it was no secret that Glaxo had around 14 per cent of the ethicals market. "AAH are not materially out of line with this."

Mike Williams has set up a brokerage service to provide national sales representation for smaller manufacturers. The former sales director of Countercall, and more recently the Miles Group, launched OTC Sales and Marketing on April 2. "So far its been going very well," he told *C&D*.

"The advantage for manufacturers is that for the cost of one sales person it can have national sales distribution," says Mr Williams. OTC Sales and Distribution. Tel: 0223 421820.

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BUSINESS NEWS

Medeva announce £4m profit in year one

Medeva have turned a £2.62 million loss in 1989 into a pre-tax profit of £4m last year, while turnover has leaped from £866,000 to some £52.6m. In the light of these results the board have announced the company's first dividend.

Turnover up 5,800pc to £53m

Pre-tax profit of £4m

Earnings per share 3.4p

Final dividend 0.75p

Chairman Bernard Taylor said: "We began the year as Medirace, a small research based company with a net worth of £425,000. We have ended the year with profits, no borrowings, cash in hand of £7m and shareholder funds of £44.6m."

The company now claims to be the UK's largest manufacturer and distributor of generic pharmaceuticals and is the principal supplier of vaccines to the NHS.

In his statement to shareholders Mr Taylor said that the transformation in the group's results was the result of the combined effect of the company's acquisition of Thomas Kerfoot and Evans and the disposal of Evans' OTC products.

Further products will be added to the company's portfolio both through acquisition and in-house development.

Boardroom changes include the retirement of Alan Goodman with the completion of planning for the move of the company's generics production to Bardsley Vale, and the arrival as non-executive director of Ken Sinclair, chairman of Barclays de Zoete Wedd Securities. Dr Ian Stewart joins the board as managing director of the combined Evans-Kerfoot businesses. He was previously chairman and md of Rorer (UK).

Severing one of the remaining links with the Medicare business, Medeva are to discontinue the development of Contracan, an experimental AIDS and cancer treatment.

Earnings per share for the company were 3.4p, against minus 12p for 1989. A final dividend of 0.75p per share has been declared by the board.

● Medeva subsidiary Evans Medical have bought the option on a new biological immuno-modulating product from University College London for an undisclosed sum. The company intends to buy the worldwide rights to the product when it has analysed its financial potential.

The product has been derived

from *Mycobacterium vaccae* by Drs Stanford and Rook at the Middlesex Hospital. A chance finding in the early 1970s showed that *M vaccae* enhances the efficacy of the BCG vaccine.

It is also possible *M vaccae* delivered in a "killed" rather than "live" preparation may be an effective treatment of leprosy in its own right. Uncontrolled field studies in Spain, Iran, Kuwait and The Gambia in around 10,000 patients suggest that *M vaccae* has potential against both leprosy and tuberculosis.

Beyond this, new data has emerged which suggests a product made from *M vaccae* could have beneficial applications in the prevention and treatment of a range of auto-immune diseases, including rheumatoid arthritis and psoriasis.

Any commercially available preparation is still some years off.

Generics key to success

Generics will hold the key to success in the fringe pharmaceutical sector in coming years, where pan-European sales are forecast to reach nearly \$4.5 billion by 1994.

This is the view of a new report from Frost & Sullivan, which says sales of generic products were worth an estimated \$3.43 billion in 1989, compared with almost \$580m of parallel imports.

Frost & Sullivan believe the most significant event in recent years has been the introduction of the reference price scheme by West Germany in 1989 and by the Netherlands in April 1991. By 1995 Germany is expected to account for 58.5 per cent of the West European market for fringe drugs, followed by the UK with 17 per cent.

In the UK, parallel imports account for 40 per cent of 1989's \$567m estimated fringe market. The UK also has a strong generics market and, although margins have been squeezed in recent years by price competition among the importers and the high cost of financing working capital, sales are forecast to reach \$767m by 1994. *The European Market for Fringe Pharmaceuticals - Parallel Imports and Generics, E1396 (\$3,300). Frost & Sullivan, Sullivan House, 4 Grosvenor Gardens, London SW1W 0DH.*



Sir Christopher Benson (left) chairman of Boots, and John Mayo, director general of Help the Aged, launch the Boots/Help the Aged endurance challenge. From April to October Boots' employees will be encouraged to tackle an assault course to raise money for Help the Aged and Boots' mixture and general benevolent funds. The fundraising target is £250,000 plus

AAH launch new generation of Link computer systems

AAH Pharmaceuticals have launched a new system of integrated computer hardware for the pharmacy together with a range of software upgrades.

The flagship of a three computer range is the Linkage PC, which succeeds the current Link 2+ system. The £3,350 Linkage system features a 386 SX processor, an integral 100 megabyte hard disc, a 2 megabyte ram memory and a 150 megabyte tapestreamer.

Linkage uses the same software as the Link 2+. The company believes its increased memory capacity and faster processing will benefit both pharmacy and general business applications of the system. A four colour monitor offers the options of a blue, green, white or amber screen on which to work.

AAH have signalled their commitment to the system, installing the product for their own computing needs.

Second in the range is what AAH believe to be the first in-pharmacy laptop computer, Linktop. This is a PC-compatible microcomputer incorporating a back-lit LCD display, rechargeable internal battery and full keyboard.

Its primary use is for order entry but eventually the Linktop will be able to provide short-term back up should a Link 2+ or Linkage system fail.

Linktop operates on MS DOS 3.3 with a disk-free start up

facility. It has a 640KB ram memory and can run the spreadsheets and word processing package (Wordperfect Executive) supplied free with the machine. Linktop is available at a monthly rent of £25.

As a third unit, for a limited period AAH are offering a 286i Link 2+ machine (£2,795) complete with twin 40 megabyte hard disc drives and a 286 processor. It offers a mid-range specification system pitched between the current Link 2+ and the new Linkage.

Those who have AAH's Link 2 and 2+ systems are catered for by a series of upgrade options — Linkbridge.

Option one is designed for Link 2+ systems with an integral tapestreamer. The package includes a 286 processor and a second 40 megabyte hard disc drive to increase processing speed and disk capacity, the company says. The price, with installation, is £675.

Option two is the same as option one but includes a tapestreamer for those who do not already have one. The cost of this upgrade is £1,100. Link 2 users can also upgrade to the new 80 megabyte 286i microprocessor for £1,745.

All three items in option two can be purchased separately, but to minimise security risks AAH will not offer hard disc upgrades to users without tapestreamer backup.

Proctor & Gamble buy Max Factor and Betrix

Proctor & Gamble have bought Max Factor and Betrix from Revlon for \$1.14 billion cash. Betrix is a German-based beauty aids company.

Under the agreement P&G acquire the Max Factor and Betrix lines of cosmetics and fragrances plus several other brands. The two companies have combined annual sales in the region of \$800 million, \$600m of which comes from Max Factor. With this acquisition P&G will be represented in countries which account for 80 per cent of the \$16 billion worldwide cosmetics and fragrances market.

About 75 per cent of Max Factor's sales are outside the USA with particular concentrations in the UK and

Japan. Betrix is a more Eurocentric company and its major lines are relatively unfamiliar in the UK: Street Life, Laura Biagiotti and Otto Kern.

Beyond the brands and organisations the acquisition includes leased administrative facilities, production equipment and manufacturing plants in the UK and Japan.

"This is a good fit with our strategic game plan," said P&G chairman and chief executive Edwin L. Artzt. "With Max Factor and Betrix we are a global player with two great lines."

Ronald Perelman, chairman of Revlon said: "This strengthens Revlon's financial position and enables us to focus on our remaining businesses."

COMING EVENTS

Numark speakers

Numark have announced the speakers for their annual convention taking place on board the MS Westerdam in the Caribbean from April 26-May 5.

The keynote address will be given by Douglas Low, Numark's chairman; the managing director of John Hamilton (Pharmaceuticals) Ltd. Don Ross, chairman of Numark's Retail Advisory Board will follow with a discussion on the issues facing independent pharmacy.

Other speakers include Graeme Millar, chairman of the Pharmaceutical General Council in Scotland, Steve Prescott of Reckitt & Colman, and Dave Griffin of A.C. Nielsen.

Numark managing director Terry Norris will conclude with a report on the past and future of the organisation.

AAH open day

AAH Pharmaceuticals are holding a family fun day and trade show at Hever Castle, Kent on June 2.

More than 30 exhibitors are expected and a range of side shows will be provided for all the family. Invitations are being sent to AAH customers throughout the South East. Ticket only.

Monday, April 22

Barnet Branch, RPSGB. Postgraduate Medical Centre, Barnet General Hospital, 7.30 for 8pm. Annual meeting and "The history of Barnet" by John Frost.

Tuesday, April 23

Stirling Branch, RPSGB. The Kingspark Hospital, Stirling at 8pm. Annual meeting and hospital tour.

Wednesday, April 24

Cardiff Branch, RPSGB. Room 165, Redwood Building, UWCC, 7.30pm. Annual meeting.

Durham County Branch, RPSGB. The Red Lion, Chester-le-Street at 7.30pm. Regional lecture — "Clinical care in the community" by Dr A. Blenkinsopp and "Pharmacy in the new NHS" by Dr J. Smith.

NPA. The Bankfield Hotel, Bingley 8pm. Annual meeting, then annual meeting of Bradford Branch RPSGB.

County of Somerset Branch, RPSGB. Postgraduate Medical Centre, Yeovil General Hospital, 7.15 for 8pm. Annual meeting followed by "Life and laughter in old Somerset" by Robin Bush.

Northern Scottish Branch, RPSGB. Annual meeting and visit to Pathology Laboratories, Raigmore Hospital.

North Metropolitan Branch, RPSGB. School of Pharmacy, Brunswick Square at 8pm. "PACT data and its interpretation" by PSNC's Gordon Geddes.

CPP weekend

The College of Pharmacy Practice is holding a study weekend on "Influences on the future of pharmacy practice" at Stratford-upon-Avon on May 11-12.

The meeting will cover issues including the balance of undergraduate teaching, competence assessment, pre-registration training, the effect of EC directives, and political changes. Cost is £100 for members and £125 for non-members. Details from Mrs A. Wingard on 0203 692400.

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Publication date Every Saturday
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APPOINTMENTS



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The Trade Marks set out below were assigned on 12th April 1988 by: The Wellcome Foundation Limited, 183 Euston Road, London NW1 to: Coopers Animal Health Limited, Berkhamsted Hill, Berkhamsted, Hertfordshire HP4 2QE.

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784704	QUADRIVAX	
764121	TRIVAX	
949470	PROFIT	Non-medicated toilet preparations; soaps; non-medicated preparations for use before and after shaving; preparations for the hair; preparations for cleaning the teeth; and essential oils.
875142	EQUIFLU	Pharmaceutical preparations and substances for the treatment of influenza.

APPOINTMENTS

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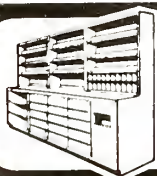
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SAVLON BABY CARE	1043281	Antiseptic preparations, soap, talcum powder, nappy liners
SAVLON BABY CARE	1043282	Antiseptic preparations, soap, talcum powder, nappy liners
SAVLON BABY CARE	1043283	Antiseptic preparations, soap, talcum powder, nappy liners
SAVLONIL	1041210	Antiseptic preparations
SAVI O LENS	1099145	Antiseptic preparations
CEPTON	1057277	Pharmaceutical and medical substances, but not including cosmetics, dentifrice preparations, or disinfectants

ABOUT PEOPLE

Society's Charter medallists

The Royal Pharmaceutical Society's Charter gold medal for 1991 will be awarded to Professor Geoffrey Booth, professor of pharmacy practice, University of Bradford, and former Society president.

The Charter silver medal will go to Mr Terence Turner, senior lecturer, Welsh School of Pharmacy, Cardiff. The Society has appointed Council member Bernard Silverman to the Statutory Committee.

Powell on his bike

Pharmacist John Powell is celebrating his 78th birthday by cycling from Lands End to John O'Groats, a total distance of 998 miles.

He is seeking sponsorship for the Royal Commonwealth Society for the Blind, who send mobile operating theatres to Africa to carry out cataract operations. Mr Powell, who is also an optician, has collected money for them in the past, one occasion being last year's Dutch International canoe marathon which he and a friend won in the over 55s category.

Mr Powell has already completed the Lands End to Shrewsbury stretch of his cycle tour, which took him a week. He had hoped to complete the whole tour in three consecutive weeks but his work as a locum pharmacist/optician prevented him having the time off. He sets out on the second leg on May 6, carrying a lightweight tent which will be his sleeping quarters.

He can be contacted at 8 Henrys Avenue, Woodford Green, Essex IG8 9RA.



Pharmacist Gerald Fox (right) thought we might be interested in his guest "trainee pharmacist" Jimmy Greaves (centre) who marked the occasion of Herington (Chemists) Ltd moving from 104 year-old premises to larger ones a few doors away. Mr Fox points out that both himself and Greaves played in the number 10 shirt for Chelsea... Mr Fox says he has scored a lot more tablets than goals! Also pictured is Eric Baldock (left); Mr Baldock retired in 1984 after a 50-year career with Heringtons

Basketball boost from Vantage

AAII Pharmaceuticals' Kingswinford branch manager Alan Danson has helped to kit-out a local basket-ball team with Vantage strips.

The "Team Vantage" is based in Kinver, near Stourbridge, and began life in 1981 as a group of pupils at Longlands

School. From these small beginnings they have gone from strength to strength and were surprised (and delighted!) to gain promotion to the local Premier Division.

The "Vantage" team is now regularly involved in fixtures against elite teams in England.



APPOINTMENTS

The United Kingdom Clinical Pharmacy Association has appointed the following officers: chairman Sally Shaw; vice-chairman Graham Davies; secretary Chris Acomb; treasurer David Anderson; editor Steve Hudson; recruitment secretary Betty Mather; public relations officer Laurie Goldberg. **McKechie Packaging** have appointed Alan Bearne as technical sales manager.

Creightons Naturally Plc have appointed Peter Cook as Northern national account manager covering from Birmingham to Scotland.

R P Scherer Ltd have appointed Roy Simpson as sales and marketing director.

Virotherm Laboratories Ltd have appointed George Sutherland as sales and marketing director. He joins the company from Mates Healthcare.

Charity begins at home in Ireland

It is well known that the Irish, apart from being the inventors of "Pure Genius", are inveterate gamblers.

The Pharmaceutical Society of Ireland is once again making the most of this trait to boost the income of its benevolent fund by holding an annual draw. And a well organised event it is too. Entry can be made by standing order at £10 a month or one payment of £100.

Last year 500 pharmacists contributed to the draw which handed out 48 prizes worth £30,000. This year the top monthly prize is £1,250, with lesser sums as second, third and fourth prizes. And to ensure things don't get out of hand the scheme is restricted to 600 entrants.

How about it, RPSGB?

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